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PRESENTED BY

Dr. B. F. Pope. u.s.a.

PRACTICAL TREATISE
ON DISEASES
PECULIAR TO WOMEN AND GIRLS:
TO WHICH IS ADDED AN
ECLECTIC SYSTEM OF MIDWIFERY;
ALSO,
THE TREATMENT OF THE DISEASES OF CHILDREN AND THE
REMEDIES USED IN THE CURE OF DISEASES:
PARTICULARLY ADAPTED TO THE USE OF
HEADS OF FAMILIES & MIDWIVES.

BY BUEL EASTMAN, M. D.,

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LARGE MEDICAL PRACTICE.

THIRD EDITION.

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CONTENTS.

PART FIRST.--Diseases of Women.

Puberty and Menstruation.....	17	Puerparal or Child-bed Convulsions.....	45
Green Sickness.....	20	Child-bed Fever.....	48
Retention and Suppression of the Menses.....	24	White or Tumid Leg.....	51
Painful or Imperfect Menstruation.....	28	Dropsey of the Womb and Ovaries	54
Whites or Fluor Albus.....	30	Prolapsus or falling down of the Womb.....	57
Copious and Profuse Flooding.....	33	Female Barrenness.....	60
Hysterics.....	37		

PART SECOND.--Midwifery.

Female Pelvis.....	65	Duties towards the Child.....	103
Internal Organs of Generation..	67	On Natural Labors.....	106
Of the Child's Head.....	69	Frst Stage of Head Presentations	108
Of Conception.....	71	Second Stage of Labor.....	111
Signs of Pregnancy.....	80	Third Stage of Labor.....	112
Developement of the Fœtus.....	85	Fourth Stage of Labor.....	114
Cause of Labor.....	87	Presentations of the Breech.....	116
Symptoms of Labor.....	89	Presentations of the Feet.....	118
Conduct during Labor.....	93	Presentations of the Knees.....	120
Duties towards the Mother.....	99	Of Twins.....	122

PART THIRD.--Manual Labor.

Preternatural or Difficult Labors	126	by the Feet.....	132
Turning the Child and Delivering	126	Instrumental Labors.....	135

PART FOURTH.--Diseases of Children.

Worms.....	138	Mumps.....	156
Diarrhoea or Looseness	144	Measles.....	158
Croup or Hives.....	148	Hooping-Cough.....	162
Dropsey of the Head.....	152		

PART FIFTH.--Properties, Uses & Doses of Remedies.

Alphabetical List of Remedies..	193	Pleurisy-root or Butterfly-weed..	176
Assafoetida.....	170	Prepared Chalk.....	188
Balsam Copavia	170	Remarks on the Use of Remedies	169
Bark and Quinine.....	173	Remarks on the present publica-	
Bladder Composition.....	173	cation.....	167
Blood-root.....	171	Rhubarb.....	181
Boneset.....	171	Rye-smut—Ergot.....	186
Calomel.....	172	Salt and Vinegar.....	187
Cayenne Pepper.....	189	Sappington's Pills	185
Colchicum- or Meadow Saffron..	172	Skunk Cabbage	182
Dover's Powders	188	Slippery Elm Bark	189
Emetic Tartar.....	174	Smart-weed.....	171
Family Composition	173	Snake-root.....	181
Fever Powders.....	189	Spirits of Turpentine.....	180
Hiera Picra.....	174	Squills	180
Indian Arrow Root.....	175	Sugar Lead.....	178
Iodine.....	175	Valerian.....	182
Ipecac.....	176	Vermifuges	183
Lobelia.....	185	Wild-Cherry Bark.....	179
Opium and Morphine.....	177		

PLAN OF THE WORK.

This third Edition is made to contain the *Botanic* as well as the *regular* treatment. The truth never loses anything by coming in contact with error. Every honest medical man should understand and acquaint himself with both systems of practice, for many reasons. If he is an unprejudiced and benevolent man, he will seek more to benefit mankind, relieve the distresses and ills of suffering humanity, than to triumph on party questions, and exclude himself from many important truths and useful remedies. The two great antipodal parties in medicine regard each other in the light of enemies and embracing many false notions about the science of medicine, and in general spend more time in opposing each other's views, and ridiculing each other's systems, than is writing out their own treatment. That is the true reason why there is so much *lumber* and *stuff* in medical writings. By being tenaciously wedded to the peculiar system which either chance or design has thrown in our way, we often fail of reaching many cases, which we otherwise could remedy. The object of this practical treatise is to give the plan adopted by the two opposing systems, in removing diseases, and then let each judge for himself. The systematic and nice arrangement of this book enables the compiler to throw together a great amount of matter in few words, and adapt it to the comprehension of almost any capacity. The public may rely upon its being a faithful compilation from all the standard authors of the regular and botanic systems of practice. For a more extensive knowledge of other diseases the reader is referred to "Eastman's Medical Practice," and for moral and benevolent purposes, to the "Hoosier's Monitor."

INTRODUCTION.

Having looked over a thinly settled country, and seen by necessity, a great number of persons obliged to *relieve* themselves and their families, I was struck with the importance of putting into their hands such a work as would guide them in a plain and prompt manner in the discharge of their duty. I hope to be credited when I declare that the present work has not been undertaken without due deliberation upon the responsibility attached to such an enterprise, and that my aim most honestly is to be useful, and supply the public with a plain, accurate and *practical* work on the science of midwifery, and those diseases which peculiarly affect the female sex and children. I shall endeavor to proceed as candidly, honestly and systematically as a work of this kind will admit of. Most of the systems of medicine that have appeared in public, have been written for the learned and scientific, clothed with medical terms, such as are not generally understood by those who are laboring under disease, and most needed help, or those who were called upon to practice the art of midwifery in a country thinly inhabited. The question will naturally arise, shall we lock up and withhold from the *suffering* patient the cause of her malady, the symptoms which spell her disease, the means of her restoration, and let her pine away in suffering solitude, when there is balm in Gilead, and virtue within her own reach! Enlightened reason would say no.

Let us then instruct the untaught, learn the ignorant, direct the enquiring, and guide the inexperienced in the practical path of safety! But methinks I hear the money-lover say it is not right to put into the hands of families, a practical work on medicine! Why not? From whence comes this objection? Not surely from the *honest* physician! for he is constantly complaining of his untimely call, and ignorant nurse? Not surely from the

suffering patient, for she too looks, and longs for relief ! Not surely from the *heads* of families, or the *practicing* midwife, for they too wish to know how to ward off disease, relieve pain, and to conduct to a favorable issue the diseases of a parturient wife ! We have long *needed* a plain, practical work on midwifery, and the other branches of physics ! The time has fully come when we can do with less theory; and we need more practice ? Every department of science, needs a thorough renovation and purgation ? We have too many complicated systems ! We certainly need a simpler application of rules to the laws of nature ? Every process of nature is plain and simple; and why not conform to her laws, and reject those complicated theories, and jargon of terms, which bewilder, and misguide from the plain and simple paths of unerring truth ! I am not opposed to learning, or theory, but I do reject with disdain "that old notion," because a man or woman has not trodden in the halls of Seminaries and Colleges ; and do not know every bone and suture, nerve and muscle which compose the head and pelvis, they therefore, cannot become well skilled in the practice of midwifery !

I have become acquainted with the *theoretical* physician, but give me the plain *practical* man, who can apply a remedy to the relief of the suffering patient ! There is much learning in the world, and many books, physical and metaphysical, but little is done to make us more practical or useful in society. Theories, tactics and fashions, often change, but little for the better. Travel back centuries and ages, and how much wiser, healthier and better is the *present* age ? Surely we are not very far removed from the dark ages ! Many persons of superior rank and intelligence, for the want of a proper mental training, have fallen dupes to a superstitious delusion ; and a belief in the interposition of supernatural powers in the cure and treatment of disease. Hence, witches and imposters have been considered as holding a competition with physicians, by their magical operations ; and some patients have paid more attention to charms, incantations and dreams, than to

their medical prescriptions! This species of delusion is more conspicuous with respect to physic, than to any other affair of common life, both because the nature of diseases, the art of curing them, and the knowledge of the science, are more obscure and least understood. I wish then, to enlighten your minds on the science of medicine, and guard you against the frauds and deceptions of the day. Why should we remain ignorant of ourselves, while we push our researches into the structure and modes of action of that which surrounds us? Do we expect to pass a life without pain and sickness, and be exempt from the laws of mortality? By no means! Each individual has to suffer his *own* pain; and *each* should know how to relieve it! We are exposed to many diseases and calamities in the country, where medical service *cannot* be obtained; where our own lives and the lives of our friends hang upon our *own* medical knowledge; where no relief can be obtained only through our *own* hands! I do not expect you to become physicians; this is not the work of a moment. But I wish to collect, and arrange in one mass, all the facts and experience of ages on the subject of which I have written—not to be read once and thrown aside as a novel, but to be frequently consulted as a directory or manual. Knowledge, particularly *medical*, is of vital importance to all; that which has so long been in the hands of the *few*, is now considered worthy of the *whole*. Nothing is more useful and necessary than that which will enable us to preserve and maintain our health,—mitigate and cure disease—prolong life, and save from an untimely grave. Each afflicted son and daughter of Adam ought to have some acquaintance with the medical science. It is a noble and elevated science, a great and useful art! It is the source of many blessings to man. It is full of intellectual greatness, and of liberal bearing. It has its thousands yet unborn to redeem from disease and death; though it has its rocks and its whirlpools. The object, then, of the present work will not be to make a *new* system, but *collect* from all other systems, that which will be useful in a *practical* point of view—to place in your own

hands, a rule, a guide and a touchstone, that you may know where there is danger—be wise where there is ignorance—kind where there is suffering—that you may relieve where there is distress—that you may help where there is need---and be useful where there is opportunity.

ECLECTIC TREATISE
OF
DISEASES PECULIAR TO WOMEN AND GIRLS.

PART I.

CHAPTER I.—SECTION I.

PUBERTY AND MENSTRUATION.

1. PUBERTY is that period of life at which the person assumes its due proportions, and distinguishing beauty of form; the voice becomes more harmonious; the countenance more animated; and the motions more graceful. The sexual organs, which previously lay in a dormant state, are so far matured, as to begin to exercise their functions. The bosom becomes greatly augmented; the breasts are expanded, and the nipple elongated. The womb and cavity of the pelvis are enlarged, and the menses appear. The future vigor of the constitution is greatly improved; and the sexual functions are now capable of full and active exercise, and appear to be intimately connected with the spirits, energy and development of many parts of the economy. The other functions undergo equally remarkable modifications, under the new and instinctive impulse which animates every part of animal life. The external

senses attain fresh and peculiar activity, the intellectual faculties become greatly developed, while the moral and social manifestations show themselves in that indescribable feeling of interest, and captivating modesty and affection which characterize the female sex.

2. MENSTRUATION signifies a monthly discharge of colored fluid resembling blood, happening every lunar month, commencing at puberty, and continuing until the end of child-bearing, unless interrupted by pregnancy, suckling or disease. Before the appearance of the "menses," they almost always announce themselves in the altered appearance of the female. Her mind is replete with changes; puerile amusements now yield to maturer enjoyments, and rational inquiry; capricious attachments give place to sincere, unaffected and permanent friendship; and the best proportions the individual is susceptible of, are now suddenly and successfully developed, *in a word*, a new creature almost seems to be suddenly formed. Besides the physical and moral changes just spoken of, there are other circumstances which mark the pubescent period to be near at hand—such as headache, dulness of the eyes, pains in the pelvic regions, lassitude, whimsical appetite, slight whitish or milky mucus discharge from the vagina. The menstrual discharge is secreted by the arteries in the womb; and proceeds from its mouth gradually from three to six days, though in some it is finished in a few hours, and there is

usually from four to six ounces of fluid discharged. In this there must necessarily be some variety, depending upon constitution, climate, and modes of life; always being earlier in hot than in cold countries; sooner in cities than in the country. This flowing usually returns with distinguished regularity—so much so, indeed, with some women, as to enable them, not only to indicate the day, but also the hour.

3. In this country women generally commence menstruating from thirteen to sixteen; and continue until between the fortieth and fiftieth years, at which time they cease, never to return. For the most part, as the period of cessation approaches, they fail in their wonted regularity—sometimes the period is protracted to six or seven weeks; and other times it is shortened; sometimes there is more, and at other times less will be discharged. As to the *proximate cause of menstruation* very different opinions have been entertained. But the latest and most probable opinion is, that it is of the nature of a *secretion*, which by a law of the constitution of the mature female, the uterine vessels are excited to pour out periodically; and for which we can no more give a reason than we can explain why bile is secreted by the liver, urine by the kidneys, or tears by the lachrymal glands.

4. The *final cause* of the menses is involved in little doubt; of this, we know at least one incontrovertible fact, and it is by all confessed, that by the

healthy performance of this function, the womb and other sexual organs are fitted for, and by its periodical return, preserved in a state capable of conception and pregnancy; as no well attested instance is upon record, where this has taken place in a female who has never had this discharge, or even when it was not of a *healthy* character, and with a greater or less degree of *regularity*. Hence we learn that with those who begin to menstruate at ten or twelve years of age, their turns will often cease before they arrive at forty; but if the first appearance was protracted to sixteen or eighteen, independently of disease, such women may continue to menstruate, and bear children till they have passed the fiftieth, or even approach the sixtieth year of their age. By this constitutional regulation of the menses, the propagation of the species is in every country confined to the most vigorous part of life; and had it been otherwise, children might have become parents, and old women might have had children when they were unable to supply them with proper or sufficient nourishment.

SECTION II.

GREEN SICKNESS.

5. This disease occurs principally in young *unmarried females* who labor under a *retention* or *suppression* of the menses, when about the age of

sixteen or seventeen, a young woman who has never menstruated, begins to droop in her general health; and becomes pale, lurid, and greenish cast of skin, we apply the term *green-sickness*.

6. SYMPTOMS.—The countenance exhibits a peculiarly pallid appearance, and the lips especially, appear to be bloodless with a puffiness of the upper and lower eyelids; and a slight appearance of tumidity of the face. The lower eyelids are often encircled with a streak of a dark or leaden hue, and in some instances, the eyelids exhibit a greenish sallow tinge. As it advances in its progress, the whole surface of the body becomes very pale, more especially the hands and the feet are affected with swellings, heaviness, listlessness to motion, fatigue on the least exercise, palpitations of the heart, languor, emaciation, pains in the head, back and hips, loss of energies of body and mind, drowsy, peevish, and hysterical, pulse is quick, but small; preternatural craving for acids, chalk or even clay. The menses, if they have ever appeared, become suppressed or painful; and usually terminate in what is called “*the whites.*”

7. CAUSES.—A sedentary and confined habit of life, more especially when assisted by impure or stagnant air, particularly in manufacturing towns where they are doomed to sit from morning till evening, at the lace frame, or engaged in mending, seaming, &c.; retained or suppressed menstruation attended

with dyspepsy at the period of puberty, are the most common causes; excessive flowings; or an ungratified longing for an object of *desire*, whether for an individual or for a particular circle of society, for home or for country, pining, eager; ungratified desire for any object whatever; in a particular state of constitution, will often produce this, and even other complaints of a more severe kind. Unwholesome and indigestible diet, particularly where accompanied with indolence, depressing mental affections, long continued and exhausting labor, attended with a torpid and loaded state of the bowels in young females co-operating with a deranged function of the sexual organs will rarely fail to give rise to this complaint.

8. TREATMENT.—Little or no benefit can be derived from remedial treatment, so long as the *exciting* causes continue to act on the patient. These, therefore, must be obviated, as early and effectually as possible. If the disease be contracted under the influence of a sedentary habit, impure or confined air, or unwholesome nutriment; then regular exercise in the open air, pure and nourishing diet, will be necessary. Where grief and dispondency have exercised an injurious influence in this respect, efforts must be made to dissipate the mental depression by agreeable company, proper society, to amuse and quiet the mind by conversation and traveling. In a majority of cases I have said the monthly discharges were interrupted; and the system ematiated, therefore, our

attention must be directed to the re-establishment of this function. This is best promoted by keeping up a slow, permanent and regular action on the bowels by *alctic* purgatives. Two or three operations daily will be sufficient for this purpose. The best preparation for this object, is the *Hiera-Picra*, combined with one fourth Rhubarb ; an ounce of this preparation may be put in a pint of spirits, and taken three times daily, in sufficient quantity to keep up this stimulating action on the bowels. At the same time in debilitated cases, other *tonics* may be advantageously administered. The different preparations of iron are valuable. The most important in this case is the *Tartrate of Iron*. Fifteen or twenty grains may be given three or four times a day in conjunction with the Picra bitters. Warm clothing, pure air, generous diet, frictions on the skin, moderate exercise, and cheerful and agreeable company will greatly aid the recovery.

1. BOTANIC DEPARTMENT.—The principal indications to be fulfilled are to restore on equilibrium of vital action, cleanse and change the general system.

TREATMENT.—It is generally best to cleanse the system by courses of medicine using the relaxing alterants as rattle root, camomile, boneset, balmony, &c., and where the patient is of a spare habit, stimulous, as prickly ash, ginger with lobelia pills, may be frequently administered. Great care should be taken to keep the bowels open with mild purgatives and enemas; the surface free and moist with the mind

contented, and cheerfulness with agreeable company, and the functions active and healthy by proper exercise, clothing and generous diet.

SECTION III.

RETENTION AND SUPPRESSION OF THE MENSES.

9. In order to health, the *menses* should begin at the pubescent age, continue at regular periods, and be of the proper *quantity* and *quality*; any departure from this may induce disease. When the secretion is obstructed on its occurrence or first appearance, it is called *retention*, and when it is obstructed in its regular periods of recurrence, it is then called *suppression*. In a practical point of view those species of disease do not essentially differ from each other. Their accompanying symptoms are nearly alike. They arise, as far as we can form a judgment, in a great measure from the same causes, and their treatment is to be conducted on the same principles.

10. THE EXCITING CAUSES are exceedingly various. Every thing which is capable of deranging the general health, has a tendency to excite irregularities, or suppression of the menstrual discharge. Hence chronic diseases of any kind, Consumption, Scrofula, Dyspepsy, or any other depressing or debilitating causes, may induce this disease. Sudden mental emotions, protracted grief and dispondency, unwholesome diet, and improper clothing, give rise to this

affection. But by far the most common cause is *cold*, operating on the system either during the interval of the menstrual periods, or immediately before the menses are about to appear, or finally during the actual flow of the evacuation. When the exciting cause acts during the interval of menstruation, their turns will not generally make their appearance at the next period, and the usual symptoms are not so very severe; a general languor and debility come on, a pale and sickly expression of the countenance, swellings of the ankles, various nervous affections, loss of appetite, general weakness and emaciation.

11. But when the menses are suddenly suppressed, while they are flowing, or when the remote cause of the obstruction is applied immediately before the impending appearance of the evacuation, the consequences are much more violent and sudden. In such cases, the most alarming symptoms sometimes almost immediately follow the stoppage of the menses. In some cases violent pains in the head, stomach and bowels, occur. At other times obstinate fevers, or inflammation in some of the organs arise.

12. TREATMENT.—When one or more of the violent affections just mentioned comes on, the first object must be to allay the alarming and painful symptoms without any immediate attention to the restoration of the evacuation. The attempt indeed to reinstate the menstrual flux, at the period when it be-

comes arrested, is almost always abortive; yet the remedies which may be proper to palliate or remove the present symptoms, will occasionally have the effect of bringing back the suppressed evacuation. In young and robust subjects, or where strong determinations of blood take place to the head, breast, lungs, efficient *bleeding* should be promptly resorted to; active purgatives, after which, Laudanum and Ether, combined, will be highly serviceable. In moderate cases, in weak and nervous females, it will not be necessary, and often improper, to bleed. Bathing the feet, and giving a strong tea of *Pleurisy root*, to keep up a perspiration on the skin, and allaying the nervous excitement by *Assafætida*, will prove valuable. In lingering cases, of some standing, where the system has sunk under the disease, and become emaciated, I am in the habit of using the following *composition*, which I would recommend to be *always* kept in a family:

13. Take one ounce of Aloes, one fourth of an ounce Rhubarb, one ounce Canella Alba Bark, one fourth of an ounce Cinnamon bark, one fourth of an ounce Anise Seed, and one eighth of an ounce of Assafætida, grind them fine and mix together; sufficient quantity of this composition may be given three times daily to keep up an action on the bowels. Two or three passages daily will be sufficient. For more than fifteen years, I have constantly used this mild, permanent and stimulating physic in menstrual, nervous, hysterical, and hypochondrical complaints.

14. In addition to the above composition, if I need to produce a stronger action on the genital organs, I am in the habit of using a strong tincture made out of *Biting-Smart Weed*; a tea-spoonful of the tincture should be given three or four times daily. It may also be advantageously used in the form of an extract. This may be made by boiling the weed, and simmering it down gently until it becomes hard. From four to six grains of this extract may be given every six hours. When I was attending College I wrote a *Thesis* on this valuable ingredient, introducing it to the medical world; from which Professor Eberle afterwards writes, "I can affirm that with no other remedy or mode of treatment have I been so successful as with this."

2. BOTANIC DEPARTMENT.—The *indications* of cure are, to moderate the alarming and painful symptoms, equalize the circulation and nervous action, and promote the secretions.

TREATMENT.—It is frequently necessary to give a course or two of medicine, using the laxative alterants, as Boneset, Balmony, Catnip, Penny-royal, Maidenhair, Motherwort, &c. Various emmenagogues have been used, and often decidedly beneficially. A strong tea of Smart Weed, or the extract, is frequently highly serviceable. The spiced bitters, or conserve, may be given three or four times a day to great advantage. Where the skin is dry and feverish, the

Pleurisy Root will contribute materially to keep up an action on the skin, and the bath for the feet should be freely used, the bowels kept open by stimulant bitters, and suitable clothing to keep the whole body warm.

SECTION IV.

PAINFUL AND IMPERFECT MENSTRUATION.

15. This is common, and generally an extremely harrassing and painful affection. It may occur at every period during the menstruating stage of life. But subjects of an irritable and sanguineous temperament are most liable to it. Sometimes four or five hours before the menses commence, severe pains are experienced in the back, loins, and lower part of the abdomen; at other times they begin to flow moderately, with little or no previous pains, but in an hour or two they become suddenly arrested; and an immediate aggravation of the torturing, forcing, or bearing down pain, follows. These pains continue for a period varying from two or three hours, to several days, terminating commonly in the discharge of a membranous substance from the vagina.

16. The mouth of the womb in these cases is often found very much closed, and the discharges are generally unhealthy. Mental emotions, cold, local injuries from a fall, and above all a peculiar irritability of

the womb itself, are the most common causes. From the extensive sympathy that exists between the womb and other parts of the system; any disturbance in this organ will greatly derange the general health. Hence we find in this disease, besides the intermitting expulsive pains resembling those of labor or abortion, severe headache or nausea, and paroxysms of violent retching and vomiting, particularly during the first few hours of the complaint.

17. TREATMENT.—This may be divided into *palliative* and *radical*; the former to allay the extreme suffering during the presence of the affection; and the latter, to prevent its recurrence, by means employed during the interval of the attacks. For a palliative, eight or ten grains of *camphor* every hour until the pains are in a great degree allayed. *Morphine* or *Opium* is generally used as a palliative. Some have used with great success equal parts of *Balsom of Copavia*, *Sweet Spirits of Nitre*, and *Oil of Juniper*. And where they are feverish in a plethoric habit, bleeding is indicated. Warm bath is also serviceable.

In instituting a course of treatment for a *radical* cure, particular attention must be paid to the general state of the system. The *Tartrate of Iron*, fifteen or twenty grains, three or four times daily, has been highly recommended. Also *Seneka Snake root*, and the *Volatile Tincture of Guaiacum*, has gained some celebrity in the relief of this painful disease.

3. BOTANIC DEPARTMENT.—The main *indications* are; to allay vital accumulations, and change the miction.

TREATMENT.—The bath and relaxant doses of Lobelia are often of the highest service. A strong tea of Ladies Slipper and Snake Root, will do much in allaying the excessive irritation, and changing the morbid secretions. The different balsamic preparations are also valuable agents in these morbid states of the system, and when aided by the warm bath, and courses of medicine, will often bring back the system to a healthy state.

SECTION V.

WHITES, OR FLUOR ALBUS.

18. This affection consists in a morbid secretion and discharge of a yellowish white mucus from the vagina, and is perhaps, the most common disease to which females are subject. Its most common appearance is between puberty and the final cessation of the menses. The CAUSES of Whites are very various. In general, whatever is capable of relaxing and weakening the system, is especially calculated to predispose to the occurrence of this disease. Females of a relaxed and nervous habit of body, are particularly liable to these discharges, whereas those of a rigid fibre, and

a robust and muscular structure, are comparatively rarely effected with this disease. The PREDISPOSING CAUSES are a luxurious, indolent, and sedentary manner of living. Frequent and profuse floodings, falling down of the womb; a loaded and torpid state of the bowels; tight lacing, or dressing about the waist; depressing mental emotions; local irritations near the vagina, and a retention or suppression of the menses, &c.

19. SYMPTOMS.—The disease shows itself by an irregular discharge from the vagina, of a fluid which, in different women, varies much in color, being either of a white, green, yellow, or brown hue. In the beginning it is, however, most usually *white* and pellucid, and in the progress of the complaint acquires the various discolorations, and different degrees of acrimony, from whence proceeds a slight degree of smarting in making water. Besides the discharge, the patient is frequently afflicted with severe and constant pains in the back and loins, loss of appetite, failure of appetite, dejection of spirits, paleness of the countenance, chilliness, languor, faintness, and swellings of the lower extremities, &c.

20. TREATMENT.—The cure of Whites is almost always attended with great difficulty, especially in protracted and severe cases. Although a local disease, it seldom fails, ultimately, to derange other organs, and to establish by degrees a general state of ill health, especially in delicate, irritable, and nervous habits.

In prescribing for this disease, the general state of health ought always to be strictly attended to, as an important preliminary step in its remedial management. Should there be a general excitement, and the patient plethoric, *blood-letting* and other remedies to counteract this feverish and excited state of the system, should be first employed. Having attended to this, our attention should next be directed to local remedies. *The Balsam Copaiva* is a valuable remedy in this affection. From forty to sixty drops should be given three times daily, and continued for three or four weeks, if needed. Five grains of *Alum* and ten of *Nitre* given three times daily for a while, has succeeded well in the hands of many. Also the *Tincture of Cantharides* is an old but a valuable remedy. *Rhatany Root* has been much used in the cure of this disease. It is frequently the case that much benefit is derived by a solution of *Alum* in a decoction of *Oak Bark* being injected into the vagina twice daily for a time. This will generally strengthen the parts, and lessen the discharges.

4. BOTANIC DEPARTMENT.—The different *indications* of cure consist in removing the causes, restoring an equilibrium, and strengthening the morbid parts.

TREATMENT.—In long standing cases it is best to give a course or two of medicine, to cleanse the general system, and then our next step will be of a more local character. The vagina may be frequently in-

jected with soap suds, and then with astringents. A strong decoction of Oak, Hemlock and Witch Hazel barks, will form a very good injection for this purpose. A solution of Alum with the mucilage of Slippery Elm is good for injections. In cases of much debility, strengthening bitters will be highly serviceable. The Rhatany root is certainly valuable in this affection.

SECTION VI.

CPIOUS AND PROFUSE FLOODINGS.

21. This immoderate discharge of the menses, or unnatural flux of blood from the vagina, occurs under very different states of the constitution, and the treatment is widely different. It may occur in the pregnant, or unimpregnant states; sometimes, though seldom, before the age of puberty, often about the cessation of the menses, and following abortion, during and after pregnancy. In some instances, the menstrual secretion becomes so copious as to cause much debility and exhaustion, and to require immediate interference. In many females the flow of menses is always very large, who, nevertheless, enjoy a state of vigorous health. So long, therefore, as the health of the female continues unmolested by copious menstruation, it cannot be accounted immoderate, or a proper object of medical attention; but when this evacuation gives rise to debility, exhaustion, and other

34 COPIOUS AND PROFUSE FLOODINGS.

symptoms of ill health, it amounts to a morbid discharge, and requires remediate measures.

22. Females who are much afflicted with flowings, become pale, sallow, weak and dyspeptic; and in some habits, swelling of the feet, and a dropsical state of the system, pains in the stomach with great muscular prostration, are apt to ensue. The *Whites* often occur during the intervals of the floodings, and contribute greatly to the general debility and relaxation. Copious floodings are sometimes preceded by various *premonitory symptoms*, such as pain in the loins, a feeling of fulness and pressing down in the womb, heaviness of the head, slight and creeping chills, and transient flushes. At other times, a sudden gush of blood takes place without any indications of its approach.

23. THE CAUSES which most frequently give rise to floodings, are violent exertions of strength, sudden surprises and frights, violent fits of passion, great uneasiness of mind, uncommon longings during pregnancy, over-fulness of blood, profuse evacuations, general weakness of the system, external injuries, as blows and bruises, and the death of the child in consequence of which; the after-birth becomes *partially* detached from the womb, leaving the mouths of the vessels perfectly open, tightly laced corsets, and protracted whites, in fact, whatever is capable of relaxing and debilitating the general as well as the sexual system, or inducing general plethora.

24. THE TREATMENT must differ according to the particular causes of the disease, and according to the different states of constitution under which it occurs. 1st. remove the predisposing and exciting causes,—2nd. lessen the momentum of the general circulation, if it be not below the natural standard,—3rd. constringe the bleeding vessels. If the female be of a full habit, and pulse quick and active, *bleeding* will be advisable, and every thing which has a tendency to allay the excitement of the system, should be used. She should keep still and quiet, avoid getting up or walking about, and take cooling acidulated drinks, and keep the bowels open with salts, and use cold local applications. Where the floodings are copious, we should also use such remedies as experience has shown to be capable of constringing, or in some way or other checking, the actions of the bleeding vessels. Among these the *sugar of lead* holds the first rank, and will seldom disappoint our expectations entirely, in the active variety of the disease. From two to three grains, either alone or with *opium*, every half hour, or hour or two, according to the rapidity of the case, should be given. The *tincture of cinnamon*, is perhaps, more frequently used than most other remedies. From thirty to sixty drops may be given every hour or two. *Alum* also is very good. In profuse and rapid cases much relief may be obtained by applying *cold* applications to the genital parts, or injecting them into the vagina.

36 COPIOUS AND PROFUSE FLOODINGS.

25. In weak, nervous, and debilitated states of the system, where this disease is dependent on relaxation and loss of action in the uterine functions, little or no permanent advantage can be obtained from astringent, and cooling remedies. These cases are indeed often extremely obstinate in their course, and require such remedies as tend to invigorate the uterine vessels. Take one drachm of *Prussian Blue*, and five grains of *Aloes*, and make them into twenty pills. Take one, three times daily. This in conjunction with the Tincture of Cinnamon, will seldom fail. The composition recommended in (*par 13,*) is very valuable, also the *Hiera Picra*. Where *active* floodings follow abortion, or delivery, the best remedy is *Opium* or *Laudanum*, and *Sugar Lead*, given as directed before; at the same time using brisk frictions over the region of the womb, and applying *cold* applications to the parts of generation, or injecting them into the vagina.

5. BOATANIC DEPARTMENT.—The *indications* are to restore an equilibrium, and constringe the bleeding surfaces.

TREATMENT.—In cases threatening abortion or premature delivery, the patient may use a strong tea of witch hazle, and a small portion of Cayenne Lobelia and Nervine, and keep warm applications to the surface and lower extremities. “If there is high fever the surface may be bathed with cool water. If cold and clammy, warm enemas and the bath should be

used." A very good remedy for bleedings consists of a strong decoction of Witch Hazel leaves, Bayberry Root and Bark, and a small proportion of No. 6. Drink freely, and inject the same into the vagina. Alum whey and curd will be found a good agent in arresting the passive, and some of the more active haemorrhages.

SECTION VII.

HYSTERICS.

26. Hysterics, like most other nervous diseases, show themselves most frequently in irritable temperaments, and particularly during the menstrual period of life, in which irritability is at its highest tide; as from the age of puberty to the cessation of the menses; seldom appearing earlier or later than those periods, though it is more common to meet with hysterical girls who have not menstruated, than old women who have done menstruating. It is during this period that all the feelings of women are most active, it is then that they are most likely to fall in love, and to experience anxieties and sorrows of all sorts, whether real or imaginary. This, though a corporeal complaint, yet it appears under such various shapes, affecting both body and mind, and intimates so many other diseases, and is attended with such a variety of symp-

toms, which denote the animal and vital functions to be considerably disordered, that it is difficult to give a just character or definition of it, and it is only by taking an assemblage of all its appearances, that we can convey a proper idea of it to others.

27. This affection is very intimately connected with a derangement of the womb, which, more or less, sympathizes with the stomach and bowels; also holds a decided power over the mind. Any woman may have hysteria if she can but have emotions of the mind strong enough, and hence there is no frame that may not become a prey to spasmodic action of some kind or other, especially, those in which the uterine system is in a high state of irritation, and as the sexual organs lose much of their orgasm during the period of conception, we may also see, why the disease should attack barren, rather than breeding women, particularly, young widows who are cut off from the means of exhaustion they formerly enjoyed.

28. For the purpose of fairly understanding this disease, it may be divided into three heads, namely: 1st. CHRONIC OR HABITUAL HYSTERIA;—2nd. CONVULSIVE HYSTERIA, and 3d. HYSTERIC STUPOR without spasms of the voluntary muscles.—1st. CHRONIC OR HABITUAL HYSTERIA occurs in weak, delicate, irritable, and nervous habits, particularly in such as are affected with sexual diseases.

29. THE ACCOMPANYING SYMPTOMS are of every variety. Their temper is variable and fickle, and the mind is as unsteady as the muscles; often fretful and discontented, sometimes animated and talkative, peevish and gloomy; they pass often rapidly from laughing to crying, from gaiety to melancholy, from despondency to hope; they are apt to loathe, dislike, disdain, to be weary of every object. They pine away, void of counsel, often weep and tremble, timorous, fearful, sad, and out of all hopes of better fortunes. They take delight in doing nothing for the time, but love to be alone and solitary, though that does them more harm. While awake, some are troubled with a foolish kind of bashfulness, and during sleep, frightful dreams. Thus they are affected for a time, but by and by they are as pleasant and merry as ever they were in their lives; they sing, discourse and laugh, in any good company, upon all occasions.

30. There is another train of symptoms peculiar to the corporeal system, such as unpleasant, or painful sensations in the abdomen, head, or chest, wind on the stomach, and a rumbling noise in the bowels, severe colic pains, a sense of weight and bearing down in the region of the womb, pain in the neck of the bladder, and a suppression, or difficulty in discharging the urine, variable appetite, eructations, palpitations of the heart, weakness and faintness, a circumscribed pain near the pit of the stomach or back, and the sensation of a ball rising in the throat from the

stomach, causing oppressed and hurried breathing, and a feeling of impending choking. Patients laboring under this form of constitutional Hysteria, seldom become affected with *convulsions*.

31. 2nd. THE HYSTERIC PAROXYSM usually comes on suddenly. Sometimes the fit consists in violent and convulsive laughing, alternating with crying and screaming, or attended with mental alienation; rapid and incoherent talking, singing, suffocating spasms of the throat, a wild and furious expression of the countenance, raving, gnashing the teeth, tearing out the hair, beating the breast with the hands, biting, &c. Occasionally these symptoms subside without terminating in convulsions. More commonly, however, convulsions of terrific violence, speedily supervene.

The body is rigidly bent backwards and contorted, the breast projected forwards, and the head drawn backwards, the face swollen, the tongue protruded, or the jaws firmly closed, the eyes rolling, the teeth gnashed, the fists clenched, the arms spasmodically thrown about, in short, the whole system is violently thrown into contortions. When these fits cease, the patient is left in an exhausted condition for a short time, but often another comes on, and so one after another, until I have known ten or fifteen fits ensue. After an hour or two they pass off, leaving a feeling of soreness, and a slight pain or uneasiness in the head, and pit of the stomach.

32. 3d. IN HYSTERIC STUPOR the patient, without any previous spasmodic affections, sinks into a state of complete insensibility. She lies on her back with the extremities extended and relaxed, the eyes closed, the teeth firmly locked, and the breathing slow, and intermitting, the countenance pallid, the power of swallowing appears to be entirely suspended, occasionally, a deep and long respiration is made, and when the patient recovers a little, to tear the clothes from her bosom. Sometimes young females will continue in this state for many hours or a whole day. It generally passes off rather suddenly, and the patient awakes, as it were, from a deep sleep, and looks about with an air of surprise, and speedily recovers the entire possession of her mental and corporeal powers.

33. CAUSES.—*The remote cause* of Hysteria seems to be in the generative organs, and some irritation located within the cavity of the back bone. The *pre-disposing cause* depends sometimes on a peculiar constitutional habit, and in some instances, is manifestly hereditary, and in more it is *acquired*. It is much more commonly encountered in the mansions of the rich and luxurious, than in the hovels of the poor and laborious. Indolence, sedentary habits, a pampered and luxurious mode of living, agitating emotions and depressing passions also have a powerful tendency to predispose to, as well as to excite, hysterical affections.

34. 1. THE EXCITING CAUSES are exceedingly various. Violent anger, jealousy, envy, disappointed

ambition, unfortunate love, opposed desires, in short, whatever strongly agitates, or affects the mind, may excite hysterical symptoms. 2. Eating indigestible and irritating articles of food, application of *cold* to the feet while the menses are flowing, or just about making their appearance, so as to suppress suddenly the menstrual discharge. 3. Profuse Whites, frequent floodings, nursing infants too long at the breast, excited imagination, or voluptuous feelings, produced by the improper reading of pathetic novels.

35. DIAGNOSIS.—Hysterics differ from Hypochondriacs in the following particulars, and by paying attention to them, may always readily be distinguished from them. 1. Hysterics occur chiefly in individuals of nervous, irritable, and plethoric habits, of mental and corporeal excitability, quick perception, rapid transitions of disposition and temper. Hypochondriacs on the other hand, very generally attack persons of sluggish, melancholy temperaments, unirritable fibre, added to deep and fixed study, reflection, musing and reverie. 2. Hysteria generally comes on and goes off suddenly, is attended with more painful, spasmodic, and corporeal sufferings, and has its seat in the womb, and generative functions, while the reverse happens in Hypochondriacs. It approaches slowly, goes off in the same gradual manner, mind palsied—fixed upon some engrossing subject, or looks into futurity with distressing and gloomy forebodings of distant evil, and has its seat in the liver and digestive functions. 3.

The hysterick patient is often agitated by emotions and feelings ; she loves, hates, cries, laughs, hopes, fears, in rapid succession, and often apparently without any adequate causes, while on the other hand, the Hypochondriac feels himself an insulated, deserted, and doomed being—loses his sympathies for the world—even his natural propensities and passions are absorbed by the ruling idea. He often retires from business, ponders over his losses and crosses, looks upon the dark side of everything, and finally often slides into melancholy.

36. TREATMENT.—The treatment of *Chronic or habitual Hysteria*, will differ in some respects from the other two divisions. This is generally dependent on some derangement of the uterine functions, and the digestive organs. This form of the disease is best met by giving the composition recommended in (*par 13,*) and where the Whites or floodings precede the disease, it will be best to give thirty or forty drops of the *Tincture of Cinnamon* three or four times daily. Also the *Tartrate of Iron* or Prussian Blue, or some other mild tonics, such as the cold infusion of *Wild Cherry bark*, &c., in conjunction with a mild, digestible, and nourishing diet, regular exercise in the open air, and agreeable society. And where there is any tenderness along the spine, rub on the *Tartar Emetic Ointment* or apply a blister.

37. 2nd. IN CONVULSIVE HYSTERIA if the general habit of the patient be manifestly plethoric, and the

pulse full, and active, *bleeding* should be practised. Also a warm *bath* for the feet, after which, apply a large Mustard *poultice* to them. In prescribing internal remedies, we should always pay particular attention to the nature of the exciting cause. If it be caused by irritating articles of food, an *emetic* should be administered, and vomiting excited as speedily as possible. If the hysterick fit is excited by mental emotions, *Laudanum* in union with *Assafætida* or Ether. If the flow of the menses has been suddenly checked, in addition to the above remedies, two or three large spoonfuls of the Spirits of Turpentine, with a tea spoonful of *Laudanum*, and a small portion of milk, should be freely injected into the bowels until they are well evacuated.

38. 3d. IN HYSTERIC STUPOR the most effectual remedy for dispelling the attack, is an *emetic*, followed by the mustard poultice applied to the region of the stomach and feet. The fumes of Ether, Hartshorn, or burned feathers, rarely fail to produce beneficial effects. In general, the *Assafætida* gives more perfect and prompt relief than most other articles, though Valerian, and the root of Skunk Cabbage will occasionally afford much relief. Let it always be remembered, that in these violent cases, our attention should be directed to the *cause* and *state* of the patient, and our prescriptions should be in conformity with these.

6. BOTANIC DEPARTMENT.—The *treatment* must be suited to the different states of the system, and must

be persevered in until the causes are removed, and the morbid irritation has entirely subsided. Where the case is active, the bath, Lobelia, Nervine, and the root of Skunk Cabbage will generally allay the irritated symptoms. In more Chronic cases the relaxing and charging bitters will be highly serviceable. Take Bayberry, Nervine, Cayenne, Cinnamon and Cloves, and add Bitter Root, Extract of Butternut, or Aloes, to make the whole sufficiently loosening. Of this mixture enough may be given three or four times a day to keep up a regular and permanent action on the bowels. The cold infusion of Wild Cherry Bark tends much to allay local and general irritation. The bath for the feet, and Mustard poultices with Cayenne Pepper applied to the extremities, will often prove very useful. The mind, and also the sexual organs, must be kept healthy and tranquil.

SECTION VIII.

PUERPERAL OR CHILD-BED CONVULSIONS.

39. These convulsions occur during pregnancy, in the midst of labour, or immediately afterward; they rarely, however, take place before the seventh month. They appear to be essentially *epileptic*, though when they appear before the period of *quickening*, they are generally, of the *hysteric* variety. They mostly occur

just before, or during the active stage of labour. These terrible convulsions, are always extremely dangerous.

CAUSES.—The condition of pregnancy, seems however, in some way or other, very essentially concerned in its causation. The peculiar position, or great distention of the womb pressing upon the large vessels in the lower part of the abdomen, causes a collection, or determination of blood to the brain, hence arises this frightful and dangerous affection.

40. SYMPTOMS.—These convulsions are, almost always, preceded by premonitory symptoms, which denote their approach. In some instances, they are experienced for many days previous to the occurrence of the paroxysms; in others, they occur only a few hours before the supervention of the attack. They consist in a sense of fulness, weight, tension, severe and deep-seated pain in the head, giddiness, ringing in the ears, temporary blindness, a fulness of the vessels of the head, and occasionally, a severe, dull pain in the stomach. After these symptoms have continued for a longer or shorter period, the patient is suddenly seized with convulsions. During these convulsions, the face is flushed, livid, the tongue is thrust out between the teeth, the respiration is first hurried, and toward the conclusion of the fit, a copious discharge of frothy saliva issues from the mouth, with a sputtering noise of the lips. The pulse at first is full, strong,

and tense, and cold clammy sweat bedews the whole body, and the fit begins now to decline, but the patient remains for the most part insensible or drowsy, with a loud snoring, from which she usually recovers in a few moments, after which, convulsion follows convulsion, without our being able to determine the period or cause of their return.

41. **TREATMENT.**—The treatment, in short, differs in no essential point from that which is proper in apoplexy. Blood should be *promptly and copiously* abstracted. This measure may be regarded as absolutely indispensable to any success in the management of this affection. Large mustard poultices should be applied to the feet, and purgative injections should be freely used. An active purge should be given, and cold applications applied to the head by means of a bladder. When the disease occurs near the termination of the period of gestation, labour is almost always brought on, and it should be a rule to deliver as speedily as can be done with propriety, for the delivery often puts a termination to the recurrence of the fits. Finally, let it be borne in mind, that a patient in this case, will bear the loss of an incredible quantity of blood, which must be taken from time to time, and the bowels kept freely open.

7. **BOTANIC DEPARTMENT.**—The most prominent *indications* of cure, are to relax the general system, equalize and maintain an equilibrium of vital action.

TREATMENT.—In a full, sanguine temperament, the patient should be put upon anti-spasmodics, as Lobelia, the inner balls of Skunk Cabbage, aromatics, and the laxative bitters. In a nervous temperament, the patient will bear tonics, after a course of medicine. The relaxing teas and the bath, are to be used during the spasmodic state, and the purgative and tonic bitters after the course. Large injections of Lobelia, and other relaxant articles will most generally allay the spasmodic action. Mustard poultices should be applied to the feet, cool applications to the head, relaxing and stimulating liniments rubbed in on the spine.

SECTION IX.

CHILD-BED FEVER.

42. This fever usually comes on soon after delivery; generally within forty-eight hours after delivery. It is generally ushered in by chilliness, fever, pain in some part of the abdomen, soon extending over most of it, which is increased when in an erect position, or highly aggravated by external pressure. The abdomen is tense, tumid and tender, the countenance peculiar, anxious and sunken, bowels costive, tongue white, and moist pulse, frequent and hard suppression of the lochial discharge, and the secretion of milk, distressed and agitated state of the nervous system, and generally low muttering delirium.

CAUSES.—Sudden suppression of accustomed discharges, as from the skin, womb, and the neglect of procuring stools after delivery, and sometimes by too much officiousness of the midwife.

PROGNOSIS.—This is very unfavorable. It is affirmed that seven-eighths of the total mortality in child-birth is caused by this disease. It seldom continues beyond the sixth or seventh day, and very often terminates fatally as early as the third. In its epidemic or contagious form, it seems to be very rapid in its progress, requiring very early treatment, and if energetic means be not employed within twelve hours after the attack, and at times within six, all the efforts of the practitioner may prove futile. The inflammation in the *Peritorœum* must be subdued speedily, or the patient will die.

43. TREATMENT.—Blood-letting practiced at an early period as possible, is one of the sheet anchors of the physician, both in its well developed and congestive form. In severe cases it may be repeated in four or five hours. Local bleeding by means of cups or leeches will be found advantageous, especially when followed by emollient applications to the abdomen, and laxative injections thrown into the bowels. After the depleting process, blisters may be applied to the abdomen, and dressed with Mercurial Ointment. Calomel purges and Opium, to allay the pain and general excitement, will prove highly serviceable. In conges-

tive forms the hot bath, combined with gentle stimulants, as wine-whey, should be used, and at the same time warm water and *Spirits of Turpentine* may be freely injected into the intestines. The drinks and nourishment throughout the whole course of the disease should be of the mildest and weakest kind.

8. BOTANIC TREATMENT.—The great *indications* of management are: 1st. to equalize the circulation and nervous excitement; 2nd. to maintain an equilibrium and determine to the surface and extremities.

TREATMENT.—The main point is to keep up an action with the relaxant teas, cleansing the stomach and bowels with emetics and injections, using freely the vapor bath, fomenting the bowels with bitter herbs, or poulticing with Pond Lily or Slippery Elm, sprinkled over with ground Mustard or Cayenne, during the interval of the baths. One course after another must be followed up until the fever abates and the patient is convalescent. The bowels may be kept open with vegetable pills and the laxative injections, and the skin must be rendered moist with sweating teas of Pleurisy Root, Boneset, and weak Lobelia infusion.

The great object of the vapor bath, it will be readily seen, is to equalize the available or extra vital force, and distribute it over the whole system. This is the great *desideratum* in the practice of physic.

SECTION X.

WHITE, OR TUMID LEG.

44. This white, tumid, or as it is called, milk leg, comes on lying-in women, usually from the fifth to the ninth day after delivery, though sometimes it does not come on until about the fifteenth. It consists of a tense, elastic, painful, pale, white swelling about the upper part of the thighs, groins, parts of generation, gradually extending down on the inside of the thigh to the knees, or feet; communicating to the touch a feeling of numerous indurated ridges under the skin, and attended with more or less fever, usually of a hectic character. Women of all descriptions are liable to be attacked by it during and soon after child-bed; but those whose limbs have been pained or swelled during pregnancy, and who do not suckle their offspring, are more especially subject to it. It has rarely occurred oftener than once to the same female.

45. **S Y M P T O M S .**—In general, the first manifestations of the disease are, pain and stiffness in the groin of one side, preceded or accompanied with chills, or strong rigours, followed speedily by the ordinary train of febrile symptoms. The swelling is exquisitely painful and uneven, and continues to increase until

the extremity becomes in some cases, enormously distended. The patient is always irritable, restless, and tormented by her sufferings. In general, the breasts become flaccid, and the secretion of milk is in part, or wholly suspended. The duration of the disease is very various. It seldom, however, terminates under two weeks, and it may be prolonged to the fourth or fifth. The CAUSES are not well understood, as it occasionally occurs under all circumstances. The most reasonable conclusion to which we come is, that by the pressure of the child's head, the lymphatic vessels of the affected limb become completely "engorged," and thrown into an irritable and inflamed state.

46. TREATMENT.—From what has been said it is obvious, that the treatment must be decidedly opposed to this inflammatory and excited state of the system and limb. Then *blood-letting*, both general and local, are required during the early stages of the complaint. In some instances the febrile reaction, though not apparently very vehement, yields with great difficulty, and many bleedings are required, before the pulse can be sufficiently reduced. *Purgatives*, such as Salts and Senna, should be freely used during the active stage of the disease. Thirty-five or forty drops of the Tincture of *Colchicum* or Meadow-saffron, given in union with *Magnesia* every two hours, have been highly serviceable. A free and gentle perspiration should be kept up by giving a strong decoction of Butterfly root, Dover's Powders, or Antimony, in combination with

Nitre. Among the external local remedies employed in this affection, *fomentations* with flannel wrung out of hot vinegar and water, or Sugar of Lead, or the application of a strong solution of Sal Ammoniac, and after the pain, heat, and swelling begin to abate, moderately stimulating lotions, such as Champhorated Spirits or Brandy,—emollient poultices will then do good. During the febrile state, the diet must be of the simplest and weakest kind. The drink should be Slippery Elm or Flax-seed tea, and during recovery, the aliment should be digestible and nourishing; and when the patient is left in a weak state, gentle *tonics* may be administered.

9. BOTANIC DEPARTMENT.—The *treatment* consists in allaying the feverish and excited action of the system, and recalling the blood from the irritated limb to other parts, and promoting the absorption. The system should be relaxed by the bath, Lobelia, and other relaxant teas, in order to subdue the inflammatory state of the system. Course after course must be adopted, until an equilibrium is restored, and then poultices of Pond Lily and Lobelia should be applied to the diseased limb. White Beans sometimes form an excellent poultice for this purpose. A moisture or sweat should be kept up on the surface, and also on the swelled and insorated limb. Pleurisy root, and relaxing bitters may be freely used, and where the system is feeble and irritated, *tonic* bitters may be allowed.

SECTION XI.

DROPSY OF THE WOMB, AND OVARIES.

47. The womb and female testes, like many other organs, are subject to dropsy. It is true that this disease is rarely found in the cavity of the womb, and when this is the case, the orifice is perfectly closed. It is much more frequently to be found in a cyst, or the walls of a hydatid, or a cluster of sacks between the tunics of the organ.

THE SYMPTOMS are a heavy, circumscribed protuberance in the lower part of the abdomen, with obscure fluctuation, progressively enlarging, without a retention of urine or pregnancy—mouth of the womb thin, and yielding to the touch.

48. THE SYMPTOMS which accompany the Dropsy of the Ovaries, are a swelling and a sense of weight at the lower part of the belly, and according as the right or left ovarium is affected, the tumor and hardness are perceptible in one or other groin. When the disease is somewhat more advanced, fluctuation may generally be felt, sometimes nearly as distinct as in common dropsy of the abdomen, but usually more obscure. At first the general health is very little dis-

turbed, the menses still appear at their accustomed time, and the woman may become pregnant, and bear a child at full time, while one ovary may be largely distended by dropsy. When the disease has reached a certain point, it produces many very unpleasant symptoms from mere bulk—difficult breathing, costiveness, piles, pain about the groins, thighs, and sides of the lower belly, dyspeptic disturbances of the stomach and intestines, retention of urine, swelled legs and feet, with cramps, and the tumor may be felt between the vagina and the lower intestine on examination, throwing the mouth of the womb toward the pelvis.

CAUSES.—Often no cause can be assigned, but the general causes are, blows, falls, frights, violent passion, or *cold*. It does not appear that impregnation gives any peculiar disposition to it. It is sometimes found in pregnant women; but far more commonly in the unimpregnated and barren. It is also met with in the young, and those who regularly menstruate, as well as in those whose term of menstruation has just ceased.

49. TREATMENT.—The general treatment is much the same that it is in all common dropsies. When the constitution is strong and robust, active purging may be advisable. *Jalap* and *Cream of Tartar* constitute an excellent purge. Dr. Richmond communicated to me the best remedy I ever gave in general and particular dropsies, especially in dropsy of the abdomen.

56 DROPSY OF THE WOMB, AND OVARIES.

It possesses a kind of tonic, and very great purgative qualities. It is a strong decoction of *Indian Arrow Root*. This may be given from day to day, in sufficient quantities to produce active operations on the bowels. *Digitalis*, *Squills*, and *Colchicum* have all been used with much benefit. *Iodine*, employed both internally and externally, has become the most celebrated remedy in this disease. Internal medicines may be given as long as there is any hope, but where the symptoms are urgent, we must resort to the operation of tapping; but this should be put off as long as possible, for after we once commence, we will generally have to keep it up as long as the patient survives.

9. BOTANIC DEPARTMENT.—The principal *indications* to be fulfilled are, to promote absorption, carry off the accumulated fluid, and restore energy to the whole system.

TREATMENT.—The whole system must be relaxed and changed, by the action of the bath, *Lobelia*, and the relaxant teas. The different hydragogue Cathartics, as *Indian Arrow Root*, *Jalap*, *May Apple*, *Gamboge*, &c., may be used as circumstances demand. Diuretics, as *Juniper Berries*, *Horse-radish*, *Cleavers*, *Aspen bark*, &c., may be given in *Holland Gin*. Where the system is much debilitated, the tonic bitters must be combined with the diuretic. If the disease does not yield when the functions are mostly restored

to a healthy state, it will be advisable to perform the operation of *tapping*, and continue the course of medicine until perfect convalescence is established.

SECTION XII.

Propolapsus, or Falling Down of the Womb.

50. Notwithstanding the womb has *four* ligaments, purporting to support and sustain it in its situation, yet this is sometimes illy performed, and it sinks very low into the vagina, and occasionally discovers a disposition to escape from the body—this subjects the woman, when excessive, to certain inconveniences, but to none when moderate, except perhaps a sensation as if something were escaping from the vagina, when she is in an erect posture, but this is almost instantly relieved when she disposes herself in a horizontal position. This deranged situation of the womb may take place in its unimpregnated, as well as in its impregnated state—the latter however is by far the most common, especially between the second and the fourth months of pregnancy. The disease is most common to women who have had a numerous family, but is occasionally met with in virgins after straining, using violent exercise in dancing, or running, or meeting with falls during menstruation. This organ, in fact, is subject to various changes of position, and its axis

with respect to that of the pelvis, may incline backwards, forwards, or to either side. The *retroversion*, where the upper part is thrown backwards between the vagina and large intestine, is more common than the *anteversion*. This disease shows itself by what is called a bearing down of the womb, which is a descent produced by weakness or debility of the general system, or a relaxed state of its ligaments, and its own weight when in an upright position.

51. SYMPTOMS.—A sensation of bearing down, fullness and tenderness of the parts, weakness in the back, frequent inclination to make water, nervous and irritable feelings; general weakness and prostration of strength, costiveness, and a mucus discharge from the vagina. As general *predisposing* causes may be mentioned, a capacious pelvis, relaxation of the ligaments that support the womb, pressure of the abdominal contents; immoderate distension of the bladder, constipation, and hard straining at stool, tedious labors, and long continued whites.

52. TREATMENT.—In attempting a cure, we must first restore the prolapsed organ to its proper position, and if the general system is in a state of debility, restore it by gentle *tonics*. Injecting into the vagina astringent and strengthening applications, such as a solution of alum, oak bark, or green tea, or even cold water, will generally be found useful. New and rough port wine, diluted with an equal quantity of cold wa-

ter, has proved one of the most valuable injections. The bowels should be kept regular, the bladder empty, and the patient quiet and free from fatigue. Should these means fail to afford relief, the womb may be supported by Mrs. J. Betts' Uterine Supporter of Philadelphia, which is well calculated for this purpose.

10. BOTANIC DEPARTMENT.—The *indications* are, to remove the causes, strengthen the parts, and support the womb.

The *treatment* must commence with courses of medicine, to restore the general system. No hopes of permanent relief can be indulged until the general health is reinstated. After proper courses, laxative and tonic bitters must be freely used. Local means must also constitute a part of the treatment. The womb must be returned to its proper position and the parts strengthened by appropriate astringent injections. Soap suds and a mucilage of Slippery Elm will form a good application to begin with; after which the Bark of Witch Hazle, Bayberry and Hemlock may be used as injections. Alum, in a strong decoction of Rhata-ny Root and Oak Bark, will form a good injection.—Some cases of long standing, in addition to the above, will require a Uterine Supporter to aid in the cure.

SECTION XIII.

FEMALE BARRENNESS.

53. This barrenness exists from *functional and organic causes*. 1st. There is a direct imbecility or want of tone, rather than a want of desire, and the ordinary causes are, a life of intemperance of any kind, especially of intemperate indulgence in sexual pleasures, chronic gleet, whites, or palsied affection of the generative organs. It has also been occasioned by violent contusions in the loins, and by over-exertion in walking. Also, in consequence of the venereal orgasm not occurring simultaneously in both parties, the acme of the female having been too slow or too fast for that of the male. It may occur from an incongruity, or want of adaptation of the respective seed to the respective soil, however sound in itself. The most common cause of sterility is mis-menstruation. Sometimes there is a manifest retention of the menses; at other times the quantity or quality is not of the most healthy appearance, indicating a morbid disorder of theceptive organs. Occasionally, however, the menstrual flux is thrown forth in great profusion, and is attended with violent spasmodic pain; and if, during any intermediate term, conception should take place, the very next paroxysm or distressing pain, put a total end to all hope by separating the germ from the womb.

54. 2nd. *Organic Barrenness* is produced by some structural hindrance or defect, whether natural or accidental. And this may be of various kinds. A rigid and unbroken *hymen* may prohibit all intermission of semen. The *ovaries* or *egg-vessels* may be defective, or even altogether wanting, or not duly developed, or destitute of ovula, or the uterine tubes may be obstructed, impervious or wanting; in all such cases barrenness must necessarily ensue. These, however, are rare instances.

55. Every one must have noticed occasional instances in which a husband and wife, apparently in sound health and vigor of life, have no increase while together, either of whom, nevertheless, upon the death of the other, has become a parent of a numerous family. Again we have seen a husband and wife live together for years without an offspring, when suddenly one has been called on a voyage for several months; and on the return we have seen them commence the train of an extensive progeny. Having thus pointed out the general causes, it will be obvious that the cure must depend upon a removal of the particular kind of functional or structural derangement that operates at the time, and lay a foundation for the disease. And we have seen by far the greater number of cases result from a morbid mis-menstruation. Whatever, then, will tend to invigorate the system, restore a healthy action in the uterine functions, and produce a reciprocity of feeling, will best tend to cure sterility,

as a Generous Diet, Exercise, Local Cold Bath, Warm Stimulant Resins and Balsams, Aloes, Guaiacum, Copavia, and the Oxydes of Iron, &c.

56. Having given a concise and useful treatise on the symptoms, causes, and treatment of a long list of suffering and painful diseases to which the female is subject, let me say in conclusion to you who are joined in wedlock, for the mutual purpose of promoting each other's interest, happiness and pleasures, remember (what Paul says, 1 Cor., vii, 5,) the obligation you owe to each other; and if you wish to secure retain, and rivet forever, kind, endearing, and affectionate feelings for each other, then at all reasonable and proper times freely, willingly, mutually and affectionately consummate the marriage vow.

So observes the first didactic poet of ancient Rome, addressing himself to the Generative Power, in the language not of the voluptuary, but of the physiologist:—

“So through the seas, the mountains and the floods,
The verdant meads, and woodlands fill'd with song,
Spurr'd by desire, esch palpitating tribe
Hastes at thy shrine to plant the future race.”

The cause is clear and the effect certain, but it is a disease incurable by the healing art, and can only be attacked by a kind, assiduous and winning attention, which, however slighted at first, will gradually and imperceptibly work into the cold and stony heart, as

the drops of rain work into the pavement. It should teach us, however, the folly of forming family connections, and endeavoring to keep up a family name, where the mutual feelings of affection are not engaged on both sides.

I would advise parents to buy the *Hoosier's Monitor*, as it gives many practical instructions to parents on behavior.

ECLECTIC SYSTEM OF MIDWIFERY,

CONTAINING

PRACTICAL INSTRUCTIONS FOR THE MANAGEMENT OF WOMEN
DURING
PREGNANCY, IN LABOR, AND IN CHILD-BED.

PART II.

CHAPTER I.—SECTION I.

FEMALE PELVIS.

1. That large oval ring or cavity, which is shaped like a basin, and situated below the cavity of the belly, is called the "*Pelvis.*" It contains the last portion of the largest intestines, urinary bladder, and the internal organs of generation. It is formed or surrounded by *four* bones. The sacrum bone behind, the pubic bone before, the innominatum bones on either side, and the coccygis bone below. The cavity is wide and expanded at its upper part, and contracted at its

lower aperture. The upper part of the pelvis is bounded by an oval ring, which parts the cavity of the pelvis from the cavity of the abdomen. This circle is called the *brim* of the pelvis. That part above the brim, within the haunch bones, is called the superior or upper *cavity* or *strait*, and that part within and below this circle or brim is called the inferior and lower cavity or outlet of the pelvis. The shape of the pelvis is nearly oval, with its longest diameter from side to side and the shortest from before to behind. Its dimensions in a well formed woman from side to side are from five to five and one-fourth inches, and from front to the back part from four to four and a half inches. Below the brim of the pelvis, in the lower cavity or strait, the distance is nearly the same, but reversed—that is, the greater distance of this cavity runs from before to behind, and the lesser from side to side. From this it will be seen that the greater distance of the lower cavity traverses the greater distance of the upper cavity at right angles—this should be constantly borne in mind.

2. For the child's head in natural labor, while passing through the pelvis, should always make a *half turn*, so that the larger part of the head will correspond to the larger part of the pelvis. In the living subject this cavity is lined by flesh and membranes on all sides to nearly the thickness of three-quarters of an inch in each direction, which will yield considerably to pressure. When we examine the male and female pelvis,

we see there is well marked and peculiar difference. Nature has wisely arranged and fitted each for their peculiar station in life. For while the male pelvis is large and strong with a small cavity, narrow openings and bones of greater strength, the female pelvis is light, shallow and wide, with a large cavity and slender bones, which is the cause of that widening of the hips, by which the female form is distinguished from the male, while it adds to the beauty of woman, lessens her strength, but at the same time most wonderfully fits her for the important functions of child-bearing, or conduces to the easy passage of the child.

SECTION II.

INTERNAL ORGANS OF GENERATION.

3. The internal organs of generation consist of the *vagina*, the *womb*, and its appendages, *fallopian or uterine tubes*, and the *ovaries or egg vessels*. The *vagina* is that canal which leads from the external parts of generation to the womb. It is somewhat of a conical form, with the narrowest part downwards, and is generally five or six inches in length and about two in diameter. But it would be more proper to say that it is capable of being extended to those dimensions, and even more, for in its common state the mouth of the

womb is seldom found to be more than three inches from the external orifice, and the vagina is contracted as well as shortened. The upper part of the vagina is connected to the circumference of the womb just above the mouth, which is suspended with two protuberant lips in the vagina, usually about one inch, and is permitted to change its position in various ways and directions.

4. The WOMB is a spongy receptacle, resembling a compressed pear, situated in the cavity of the pelvis above the vagina, with its mouth hanging pendulous in it, and is between the bladder and large intestine. The womb is three inches in length and two in breadth at the upper part, and one inch at the lower, where it extends into the cavity of the vagina. It is usually half an inch thick, and the cavity in it is somewhat of a triangular form. There is so great a variety in the size and dimensions of the womb in different women, independent of the states of virginity, marriage or pregnancy, as to prevent any very accurate description. It is susceptible of great distension, and can exert an enormous force, which it is destined to do to relieve itself of the produce of conception.

5. THE FALLOPIAN OR UTERINE TUBES are two canals from four to five inches in length, which proceed from the upper angles of the womb, and pass in a transverse direction to some distance from the womb where they form an angle, and take a direction down-

wards towards the ovaries or female testicles. Their use is to grasp the ovum or egg, and convey the prolific vapor to it, and after, to conduct the fertilized egg into the cavity of the womb.

6. THE OVARIES OR EGG VESSELS are two flat, oval bodies, about one inch in length, and rather more than half in breadth and thickness, one of which is situated on each side of the womb behind, and a little below the fallopian tubes. In virgins of mature age the ovaries include a number of viscules or eggs to the amount of fifteen or twenty, of different sizes, filled with transparent, coagulable fluid. All have agreed that the ovaries prepare whatever the female supplies towards the formation of an offspring, and this is proved by the operation of spaying, which consists in the extirpation of the ovaries, after which the animal not only loses the power of conceiving, but desire is forever extinguished.

SECTION III.

OF THE CHILD'S HEAD.

7. In order to understand the importance of the preceding description of the *pelvis*, the shape and distances of the upper and lower openings, as well as the great difference in the depth of the pelvis before, at the

sides, and behind, it becomes necessary for the well understanding of labor that the various dimensions of the child's head be known, as a proper relation must exist between it and the cavity through which it is to pass, that labor may not be obstructed. The child's head, like that of the adult, is composed of a number of bony pieces, but they are united in the same manner. In the child's head the principal bones are tied together by a firm ligamentous substance. There are *three* diameters or distances of the head which are worthy of special notice. 1st. The distance from the forehead to the crown, which is usually four and a quarter inches. 2d. From side to side, about three inches and a half. 3d. From the crown to the point of the chin, little more than five inches, but from the mobility of the chin, this is of little consequence.

8. Let it also be remembered, for practical purposes, that there are *two* apertures or open spaces in the skull, the larger one situated before, and the smaller one behind. The front one has always four long angles, and the back one has usually but three. The young beginner in the practice of midwifery should very early accustom himself to touch with the fore finger and distinguish them—it will lead him to a knowledge of the situation of the head when within the pelvis, and constantly and certainly warn him of any departure from its best position, and thus enable him at a proper time to effect any change that may be necessary, with a view to render the labor safer, easier and of more

speedy termination. No midwife can render assistance with any certainty, where the head has departed from its proper route, who is incapable of distinguishing this departure by the touch. He will either not distinguish the faulty position and thus condemn the poor woman to protracted and unnecessary sufferings, or he will blindly and rashly attempt relief at the hazard of the lives of mother and child.

SECTION IV.

OF CONCEPTION.

9. All animated nature, throughout all the varieties of vegetable and animal existence, asserts the necessary co-operation of the male and female in the production of a living being. This is a decree of the great Fiat. This is a universal law of nature, which no man or philosopher of the present day will venture to contest. But what is the part which each sex performs in this wonderful and mysterious business, and how the semen of the male in some instances, particularly in the human, arrives at the *ovaries* or egg vessels of the female, and impresses its stamp upon the ovum or egg, are questions on which the learned are by no means agreed. However, it is agreed that the female furnishes the ovum with its membranes, its fluids, and the rudiments of the foetus complete in all its

parts, but inert, and to perish unless stimulated and aroused into life and action by the energy of the male semen. Man and the superior animals are excited to a union by the developement of the organ of amative-ness, situated in the back part of the brain. This organ is established within us for the preservation of the species, as the organ of alimentiveness is placed within us to excite hunger and thirst for the preservation of the individual. This has been termed desire of reproduction, and for wise purposes its gratification is attended with the most pleasurable feelings which man or animals can experience.

10. Prior to maturity this desire does not exist, but it suddenly makes its appearance at *puberty*, persists vehemently during youth and the adult adage, and disappears in advanced life, when procreation becomes again impracticable. Many speculations have been indulged in in regard to impregnation, but it is agreed on all hands that it becomes necessary in a successful copulation, that the male sperm be ejaculated as high up into the vagina as possible, in the direction of the mouth of the womb. Unless this is done impregnation is not likely to be accomplished; a fact which it might be of moment to bear in mind in deformities of the pelvis, or where the rapid succession of children is an evil of magnitude.

11. We have seen that the material furnished in fecundation by the male is the sperm, that afforded by

the female is ovum, and that the new being must be stamped instantaneously as by the die. From the very moment of the admixture of the materials at a fecundating copulation, the *embryo* must have within it the power necessary for its own formation, and under impulses communicated by each parent—as regards likeness, complexion, hereditary predispositions, &c. From this moment the father has no communication with it, yet we know that it will resemble him in its features, and in its predisposition to certain morbid states—while the mother probably exerts but a slight and indirect control over it afterwards, her office being chiefly to furnish a receptacle in which it may work its own formation, and that too in the course of seven or eight days after fecundation it is in the womb, and with a microscope the centre of the heart and brain may be discovered.

12. Conception usually occurs without the slightest consciousness on the part of the female, and hence the difficulty of reckoning the precise period of gestation. Certain signs or shiverings, pains about the navel, &c., are said to have occasionally noted its occurrence, but these are rare exceptions, and the indications afforded by one are often extremely different from those presented by another. In those animals in which generation is only accomplished during a period of generative excitement, the period of conception can be determined with accuracy, for in by far the majority of such cases a single copulation will fecun-

date. The existence of the state of heat indicates that the generative organs are ripe for conception.

13. In the human female, where the sexual intercourse can take place at all periods of the year, conception is by no means as likely to follow a single intercourse, for although she may be always susceptible of fecundation, her genital organs are perhaps at no one time so powerfully excited as in the animal during the season of love. It would certainly seem more likely to supervene when the venereal orgasm occurs simultaneously in both parties, and when the semen is thrown well forward towards the mouth of the womb. But we have no certain criterion, and therefore no definite time to reckon from; usually, however, we begin to count ten days or two weeks after their last monthly turn. It has been attempted to ascertain what age, season, and constitution are most prolific, and indeed something has been determined on this point.

14. From a register kept it would seem that more women between the ages of twenty-six and thirty years bear children than at any other period, and that the months of August and September are more favourable for conception. As a general principle amongst Quadrupeds, that the largest and most formidable bring forth the fewest young, while the lower tribes are usually fruitful, the number produced compensating in some measure for their natural feebleness, which ren-

ders them constantly liable to destruction. On the other hand, were the larger species to be as prolific as the smaller, the latter would soon be blotted from existence. What would have been the condition of animated nature if the gigantic mastodon, once the inhabitant of our plains, could have engendered as frequently and as numerously as the rabbit?

15. For wise purposes it has also been ordained that the more formidable animals seldom begin the work of reproduction until they have nearly attained their full size, while those that bring forth many, commence much earlier. Likewise there is some correspondence between the duration of gestation and the size of the animal. Inasmuch as the father stamps his impress upon the child, so it has been maintained that the race of men of genius may be perpetuated by uniting them to women possessed of the same faculties. Of late, also, it has been attempted to be shown that the corporeal vigor of the parents has much to do even with the future sex.

16. It appears that the proportion of males born to the females, is every where pretty nearly the same. The regular ratio according to the census, is generally twenty-one males to nineteen females. Although a greater number of males may be born, they seem more exposed to natural or accidental death, for amongst adults the balance is much less in their favor; and indeed, the number of adult females rather exceeds that

of the males. The human female is *uniparous*, or brings forth one at a time as a general principle, many other animals are *multiparous*, or bring forth many at a birth. The law however, on this subject, is not fixed. Occasionally the human female will bring forth twins, triplets, or quadruplets, while the multiparous animal is not always delivered of the same number.

17. *Menage* cites the case of a man whose wife brought him twenty-one children in seven deliveries. The largest case now on record, is where one woman had fifty-seven children at twenty-one births. In four deliveries, she had four children at each, in seven, three, and in six, two. In this country the average of twin cases is about one to *seventy-five*.

18. The medical profession has taken some pains to ascertain the cause of twins, and triplet cases. It is a well known fact, that within twenty-four hours after impregnation has taken place, the mouth of the womb is obstructed by a plug of mucous, previous to this time, if there are two or more vesicles or eggs for impregnation, that one ovule being impregnated at one copulation, and another at the next. This also is common among other animals.

19. There is a well known case cited in Charleston, where a female was delivered of twins within a very short time of each other. One of these was *black* and the other *white*. The woman confessed that on a

particular day, directly after her leaving the embraces of her husband, a negro entered her room, and was connected with her. In mixed communities it is no uncommon thing for servants to have one black, and another mulatto, at one delivery. The fertility of women seems to depend upon various circumstances, partly, perhaps, on the extent or resources of the egg-vessels, partly constitutional warmth of orgasm, and partly the adaptation of the male semen to the respective female. And sometimes the fertility seems to pass from generation to generation in both sexes, though it must be always liable to some variation from the constitution of the family that it is married into.

20. As it regards fixing rigidly the precise time of impregnation, we have no certain landmarks, for the sensations of the female are most fallacious guides, but we are usually in the habit of reckoning from ten days after the disappearance of their monthly turns. But it is manifest, that conception might have occurred on the very day after their cessation, or not until a day prior to the subsequent period, so that in this way an error of at least ten days might occur in the estimation, and again, it does not always happen that the monthly evacuation immediately is arrested. The period of *quickning*, which generally happens about the eighteenth week, does not afford us more positive evidence, seeing that it is liable to vary, being experienced by some females much earlier, and by others somewhat later. We are however justified in stating

that the ordinary duration of human pregnancy is *forty weeks*,—*nine* Calendar or *ten* Lunar months, but I have no less hesitation in affirming that it may be protracted, in particular cases, much beyond this.

21. The duration of human pregnancy, and particularly the length of time when children shall be considered legitimate, has given rise to much discussion amongst obstetrical writers, and opinions still fluctuate largely, some supposing nine and a half, ten, and even eleven Calendar months. We find in animals where we can determine without difficulty, that the period is protracted, and there is no reason to doubt that the same thing happens occasionally to the human female. At the end of seven months from conception, and even a month earlier, the foetus is capable of an independent existence, provided from any cause, delivery should be hastened.

22. This is not, however, the full period, and is therefore called *premature labor*, but if it should occur too early to be able to maintain an independent existence, it is called an *abortion* or *miscarriage*. The age at which women commence bearing children varies in different climates. It is a general law, that the warmer the climate, the earlier the monthly discharge takes place, which prepares the female for conception. In some climates it begins at nine years of age, while in northern regions, women may not arrive at puberty until they are seventeen or eighteen years old. In the

temperate zone, the most common period is from thirteen to fifteen years. They cease bearing children in the same zone, at from forty to fifty years of age.

23. In the northern regions they begin late and continue long. These rules are however liable to many exceptions. The menses with powers of fecundity, have continued in particular instances much beyond the ages that have been specified. A relative of Dr. Haller had two sons after her fiftieth year, and children are said to have been born even after the mother had attained the age of sixty; but these are rare cases, and may be said to be exceptions to the general rules.

24. The usual term is between forty and fifty, except when women marry late in life, in which case, from the postponement of the generative orgasm, they will occasionally breed beyond their fiftieth year. Child-bearing began at an early age, at sixteen or eighteen for example, rarely goes on throughout the whole of what is usually regarded as the natural period for it. The earlier or later termination of child bearing in any country, therefore, will depend upon the average age of marriage which there obtains.

CHAPTER II.—SECTION I.

SIGNS OF PREGNANCY.

25. It is by all authors confessed that no part of the human body is possessed of greater irritability than the *womb*, nor any part, the increased irritability of which is more readily communicated to the system in general. That extensive sympathy which the sexual organs maintain with every other part of the system is wonderful. With the exception of the *stomach*, which is the grand centre of sympathetic action, there is no organ or set of organs possessed of any thing like so wide an influence.

26. The *breasts* are so connected with the womb by their office that every affection of the womb is immediately accompanied by some change in them. Next to the breasts the *stomach* most readily sympathises with the womb, and through the stomach the head and heart are very soon brought to participate in its changes and complaints.

27. No sooner has a woman conceived than a much larger flow of blood is carried to the womb and its appendages. The fimbrial ends of the fallopian tubes become turgid and grasp the ovaries or female testes, an ovum in one or both enlarges and bursts. The

ovum escapes, and is carried by the peristaltic motion of the tubes towards the cavity of the womb, which begins to grow, even before the ovium enters it.

28. Such changes cannot take place without producing great irritation, which is manifested by a variety of symptoms and complaints, some of which have always been enumerated as the signs of conception.

29. 1st. At the instant of conception the woman feels, it is said, an universal tremor continued for some time, accompanied by a voluptuous sensation—the features are discomposed, the eyes lose their brilliancy, the pupils are dilated, the visage pale, &c.

30. 2d. When a young, healthy, married woman finds that the monthly discharge does not return at its usual period, she may with great propriety conclude that conception has assuredly taken place.

31. This is considered as the first and most essential sign, and except in the case of a woman becoming pregnant while she suckles, she may with great probability of being correct within a few days, date the commencement of her reckoning from the middle of the period between her last monthly discharge, and the time when she should have menstruated again.

32. 3d. When the breasts enlarge, and the areola or that red or brown circle which surrounds the nipple

enlarges, and changes from a light pink to a dark brown color, and that she soon after begins to complain of languor, nausea, and vomiting in the morning, heartburn through the day, and some degree of restlessness and want of sleep during the night, we run little or no risk in attributing these symptoms to pregnancy.

33. Notwithstanding these are the accompanying symptoms, though usually not all present, yet many mothers have never felt them, and reached even the third month of pregnancy without suspecting their situation. While others, who have borne children, judge so accurately from their peculiar feelings and former experience, as seldom to be mistaken.

34. At the same time, the wish to have children in those who have been long disappointed, or whose advanced age renders it not very probable, and sometimes from tumors, dropsies, &c., have occasioned many women to deceive themselves, as well as their friends and physicians, and led them into many ridiculous and serious errors.

35. I have in two or three instances been sent for in great haste, to attend to an obstetrical case, supposed to be her full time, when on my arrival I made an examination, (*per vaginum,*) and found not the slightest symptom of her having been impregnated.

36. It is frequently wished, and sometimes may become legally important, to ascertain the pregnant state with more precision, but before the end of the third, or the beginning of the fourth month, this is hardly possible. But after the commencement of the fourth month, the rising of the womb above the brim of the pelvis, compared with the tumor, which may then be discovered by examination, of the size of a goose egg, affords more certain evidence.

37. The internal evidence of impregnation discoverable by examination (*per vaginum*,) is perceivable in the womb. It descends lower in the pelvis, and the mouth of the womb, which, in the unimpregnated state, (especially in women who have borne children,) is so open as to admit the end of the fore finger, now becomes close shut, being plugged or sealed up by a very viscid mucus formed for that purpose.

38. For the first three, and sometimes at the fourth month, the womb is found, in consequence of its weight, rather lower in the vagina than it usually is when not impregnated. The mouth or lips of the womb are shorter, thicker, and more soft. The body of the womb is still below the brim of the pelvis. After the fourth month, or at the end of the fifth, the head of the womb can be felt nearly half way between the pubic bone and navel. In the sixth month it rises a little higher, and is more out of the reach of the finger.

39. By the end of the seventh month, the fundus or upper part of the womb reaches the navel, the neck is nearly gone, and little more than the protuberant lips can be discovered,—at the eighth month, the upper part rises to midway between the navel and the pit of the stomach, the neck is completely obliterated, the mouth is almost smooth and as high up as the brim of the pelvis, and before the completion of the ninth month, the upper part reaches the pit of the stomach, at this time no trace of the neck is to be found, nothing remains of this pendulous part, and the orifice of the womb begins to relax. All this really happens in most cases, but to ascertain these changes with precision, and thence to determine the period of pregnancy with accuracy, is by no means an easy task, and requires much experience in touch, which is to be acquired only by long and attentive practice.

40. QUICKENING, another criterion by which women attempt to ascertain the period of their pregnancy, is taken from the time when the mother first feels the movements of the child, which is termed *motion*, and which generally happens about the fourth month or *eighteenth* week, when the womb having acquired that size which can no longer be contained below the brim of the pelvis. Having attended to these external and internal signs of pregnancy, and ascertained the fact, a woman who is predisposed to miscarriage should keep herself quiet and comfortably warm, bowels open, and avoid heavy lifting, running or jumping, and she will be very likely to go her full term of time.

SECTION II.

DEVELOPMENT OF THE FŒTUS.

41. A strong, and certainly laudable curiosity is almost always felt by the enquirer, to ascertain the progress and development of the embryo or foetus; from the moment of its conception, up to the full term of complete formation or gestation. And though our knowledge upon this subject must necessarily be both limited and uncertain, yet the latest information has furnished us with some general criteria by which we can judge and determine its progress.

42. It seems also perfectly clear, that in conception an ovum does really descend from the female testes through the cavity of the uterine tubes into the upper part of the womb, within a few days after sexual intercourse has taken place, that a membranous sack surrounds or encloses it at the upper part of the womb, so as to prevent its falling down or escaping from its orifice.

43. For the first fifteen days it appears only as a gelatinous, semi-transparent, flocculent mass, and presenting no distinct formation even by the aid of a microscope. At thirty days it has attained the size of a large ant, or of a barley corn. At six or seven weeks

it is equal in size to a small bee. At two months the length is about two inches, and its weight nearly two ounces. All the parts are perfectly distinct, and many points of bone are observed in the head, trunk, and membranes. At the third month, it is about three and a half inches long, and between two and three ounces in weight. The nose and mouth are formed—the eyes are shut, and the eyelids adhere together—the head is larger and heavier than the rest of the body. At the fourth month, the fœtus is from five to six inches long, and it weighs from four to six ounces—the external parts are all developed, with the exception of the hair and nails.

44. During the fifth month the motions of the fœtus are felt by the mother. The length is from seven to nine inches, and the weight nine or ten ounces. In the sixth month we begin to find some traces of fat under the integuments—the skin is very fine, pliant and thin, the hair on the head is very thin—the eyelids are closed—the nails are wanting—the weight is one or two pounds, and its length from nine to twelve inches.

45. At the seventh month, all the parts both external and internal are still more developed. The eyelids are no longer united—the hair on the head is longer, and takes a deeper hue—the nails acquire more firmness—weight from two to three pounds—length from twelve to fourteen inches. At the eighth month, the

skin is dense and firm—the nails are firmer—the hair of the head longer—the weight at this time is from three to four, and sometimes five pounds—length sixteen inches or more. At the ninth month the bones are more complete, and the head is large and firm—the length varies from nineteen to twenty inches, and the average weight from five to eight pounds. Male children also generally weigh more than female ones.

46. Healthy females residing in the country, or engaged in active occupations, have generally the largest children, and the quickest and easiest deliveries. We have on record several cases where women have been delivered of living children which weighed fifteen pounds. It is evident, that the signs drawn from the structure, weight, and dimensions of the child, are liable to some variety; and this depends on various circumstances, such as the age and vigor of the mother, her mode of life, the diseases to which she may have been subject, and probably the climate in which she lives.

CAUSE OF LABOR.

47. After having given some facts on the progression of the foetus from conception to maturity, it becomes me in a work of this kind to say something on the action of the womb, and the causes of labor. Avicena, centuries ago, declared that labor was a law of

God, and that it came on at the appointed time. I would ask, has any hypothesis since that period enlightened us more upon this subject, than the humble confession of this honest old man. Ingenuity has attempted much upon this subject, but each suggestion has been displaced to give room to another, which, like its predecessor, was to be crowded out by some new speculation.

48. Therefore, as I wish to give you a practical work, avoiding speculations and false theories, I can say I know no reason why it takes place any more than I do why Mandrakes ripen in September, and Grapes in November, but it always comes on spontaneously, at the appointed time.

49. The appointed time having come, and the womb having been distended during gestation—the spasmodic or painful contraction of the womb commences, in order to expel the foetus in labor, during abortion, or in the form of after pains, to expel coagula, or any other foreign substance. All foreign substances having been expelled, the tonic action of the womb is exerted to reduce itself to its original size. This power often continues after visible life has ceased, and however much this circumstance may excite our surprise or challenge our belief, it is nevertheless authenticated by various testimonies.

50. Hours, and even days after the death of parturients, children have been expelled from the womb.

Thus we see these contractions are entirely independent of the *will*—their intervals can neither be accelerated or retarded by any exertion of it—nor can their force be either augmented or diminished by its influence, but passions and emotions of the mind when strong, oftenentimes exert a powerful influence over uterine action—they may suspend it after it has been strongly excited.

SECTION III.

SYMPTOMS OF LABOR.

51. Whatever uncertainty may exist as to the efficient cause of labor, we are taught by long experience, that about the *fortieth week* of gestation, there is for the most part, a painful effort made by the womb to expel its contents, and this effort is called labor. This event rarely takes place so suddenly, or so silently, as not to present a very regular series of changes, which, from their universality, must be considered as constituting a part of this process, and some of them perhaps must be looked upon as essential to its well performance. That beneficent Providence has endued women as well as other animals with powers, which, when unimpaired are equal to all her natural functions; and for the guidance of the practitioner of mid-wifery, has given us certain *premonitory* symptoms of the approach of

labor. Sometimes, a few days or longer before the accomplishment of her *reckoning*, a woman begins to feel the symptoms of approaching labor. She becomes anxious and apprehensive for the event, and like every other animal busies herself for the reception and accomodation of her infant. She moves with difficulty, and frequently complains of restlessness and pain in her back and loins.

52. 1st. As the period begins to approach, a glary secretion and discharge of mucus, almost always takes place from the vagina, sometimes it is slightly tinged with blood. She perceives some enlargement, relaxation, and a degree of protrusion of the external parts. The formation of this mucus fluid answers *two* important ends. It lubricates the vagina, which permits the foetus to pass more easily; and it acts as topical depletion for the neck of the womb and vagina, and thus facilitates the relaxation. 2nd. It is a very usual thing, especially with nervous women, to be seized with *rigors* of more or less severity in the very commencement of the silent preparations for, or during the more evident progress of the labor. These *shiverings*, or rather *tremblings*, are not the symptoms of the ushering in of fever, but are connected in some manner with the dilatation of the mouth of the womb; and occur most certainly when this is rapidly going on, or has taken place. They sometimes occur immediately after labor, but are not attended by the sensation of cold, nor are they productive of the slightest injury, though

the patient and her friends are oftentimes so much alarmed as to commit an error by giving stimulating or heating drinks, *in a word*, they require no attention. Besides these *rigors* just mentioned, we sometimes see a number of nervous or hysterical symptoms attend the progress of labor, especially with the first child, if the process be rather slow—such as a disposition to cry, a sense of suffocation or choking, palpitation of the heart, &c. All of which, however, are most sure to disappear so soon as the labour becomes active, and the pains succeed each other quickly. Under such circumstances we should give the patient every reasonable assurance of a happy termination of her sufferings; and that there is nothing uncommon in her situation. 3rd. As the period progresses her belly subsides, and the womb sinks into the cavity of the pelvis, and most in the most favorable cases—it would seem to declare a healthy condition of the womb itself, and a regular conformation of the pelvis. This *subsiding* of the abdominal tumor, is of much more importance than some others—as it indicates a speedy relaxation of the mouth of the womb.

53. 4th. Frequent inclination to make water, and a continued desire to go to stool without a discharge, are consequent upon the pressure of the womb upon the neck of the bladder and large intestines.—Under such circumstances, the urine is frequently retained or driven from the bladder in small quantities by every contraction of the womb. The *reten-*

tion seldom takes place but in contracted labors; and especially in such as may require artificial means of relief. It should ever be a rule to inquire frequently into the state of the bladder in all cases of tedious labor; and should the patient have been several hours without passing urine, the catheter should be employed, and particularly if there be no prospect that the labor will terminate speedily.—A *lax* sometimes comes on, but generally she is rather costive. If a frequent straining at stool should take place after the labor is advanced from the mechanical pressure, and should there appear to be sufficient time to permit its operation, a full dose of *castor oil* will be sufficient to remove it—should there not be time, five and twenty drops of *laudadum* will speedily quiet this inclination. If she be costive an emollient *injection* will almost always procure immediate relief.

54. 5th. As labor advances, the regular periodical pains or contractions of the womb begin. At first, the bearing down pains are slow and long between, as labor progresses, they become faster, longer and harder. The longitudinal fibres running from the head to the mouth, silently and effectually contracting and shortening, while the circular fibres which surround the mouth of the womb, suddenly and extensively relaxing and yielding—the mouth of the womb dilates or opens at each alternate pain or contraction of the longitudinal fibres, as it shortens it widens, and the membranes which contain the waters gradually

protruding through the mouth of the womb, serving as a wedge more effectually to open the internal orifice.

55. Thus the expulsive action is continued, the mouth becoming thinner, softer and shorter, the opening enlarges during the pressing down pain, a thick, slippery mucus, with or without some tinge of blood, begins to ooze from it—we then conclude that labor has actually begun. But if on the contrary, we discover no extraordinary pressure, and the internal orifice be neither dilated so as to admit the point of the finger during pain, nor relaxed again as the pain goes off, we may conclude at once that the present pains are false, that labor has not yet begun, and that it cannot be promoted by them.

CHAPTER III.—SECTION I.

CONDUCT DURING LABOR.

56. In the management of labors much judgment and caution are required, that a simple and natural case may not be converted into a laborious and dangerous one. Ill-directed measures will always have penalties attached to them, and it is only by taking a proper view of the nature of labor, that it can be conducted to a happy issue. Let it be remembered that nature should never be diverted from her proper course by the interference of art, and unfortunately

for the interest of humanity, it requires more knowledge not be *officious and meddlesome* than falls to the share of many of those who pretend to practice midwifery. When all things are doing well, the active duties of the midwife are limited indeed. To conduct a labor with safety, the practitioner should be well acquainted with its process—the order of events—be able to decide when certain of them are *wanting*, or when others are in *excess*, to estimate the force or effects of each pain—the necessity of preserving or of wasting the waters—the certainty of the presentation—the mode of rectifying any error of presentation in proper time with the greatest advantage to the patient and child.

57. He should be able to pursue a firm, candid and feeling conduct throughout the whole scene. He should not let the *over-weaning* anxiety of the friends or patient, divert him from his duty, or deprive him from the power of acting. That a kind, feeling and sympathetic conduct has great influence upon his suffering patient, I need not tell you—and to deprive her of it, is withholding a right for which nothing can compensate. “She is justly entitled to all the consolation a well-grounded assurance of a happy termination of her sufferings can afford, and this must be afforded to her from time to time, that she may profit by its encouraging influence, yet she must not be betrayed into false hopes by an ill-judged promise of a speedy issue, when the period from the very nature of the case must be remote—nothing perhaps is so

destructive to confidence, as ill-requited promises of this kind, nothing so sickening to the heart as ‘hope deferred.’”

“58. Should you judge it necessary to ascertain the situation of your patient, let the proposition be made by a *third* person, as the nurse or elderly friend —let her declare the circumstances which led you to believe it would be important, such as the length of time the patient has been in pain, the force and frequency of the pains, the evacuation of the waters, if they have taken place, and above all, the necessity of ascertaining the progress of the labor, and the nature of the presentation. If after you have made your examination, you should be importuned for your opinion of the nature of the presentation, and the duration of the labor, do not commit yourself by any positive declaration, unless you are certain of the first, and pretty sure of the latter.

“59. Before you proceed to the examination, let your patient be placed with the most scrupulous regard to delicacy, as the slightest exposure is never necessary, let the light be excluded from the room, closing the shutters if it be day, and by the concealment of it, if it be night.” Before proceeding farther, it will be important to lay down some general rules by which he and the patient should be governed during the progress of labor. 1st. The patient should keep cool and as quiet as possible. Her bowels open, and the urine freely discharged. 2d. Her dress should be such as to require little or no alteration after delivery,

therefore, her linen should be so placed as to be out of danger of becoming wet from the discharges; her petticoat should be without shoulder-straps that it may be easily removed, and a bed gown should protect the upper part of her body, or, in the absence of these, a folded sheet may be drawn up under her clothes, and slightly fastened at her waist. 3rd. The bed should be so arranged as to preserve it with certainty from the discharges, for this purpose, a blanket should be folded several times and placed on the part of the bed on which the woman will permanently lie after delivery.

60. 4th. The women who have borne children will generally chose their own position in spite of all we may *write or theorize* on this subject. It is customary in many parts, for the woman to place herself in the lap of some strong person, placing her feet on the rounds of a chair on each side. In that case the midwife should be seated on a low chair or stool in front, always remembering not to keep the patient so long in that position as to tire down the holder. 5th. If the woman will consent for you to make the choice, place her upon her left side at the foot of the bed in such a manner as will enable her to fix her feet firmly against the bed-post, her hips within ten or twelve inches of the edge of the bed, her knees bent, her body well flexed upon the thighs —this position will bring the head and shoulders near the centre of the bed, and pillows may be placed to raise them to a comfortable height. She should be

covered entirely except her head, if in winter, by a blanket, if in summer, a sheet will be sufficient. In this case, the chair on which the midwife is about to sit, should be so placed that the right arm should be next to the patient; if this be not attended to, her position will be both inconvenient and fatiguing.

61. 6th. Having seated yourself at the bed-side, choose the time of a pain for the purpose of making an examination; and proceed to it with the most rigid observance of tenderness and delicacy. First, the fore finger of the right hand should be annointed with a little soft lard or oil; and is to be carried up along the back of the thighs to the internal orifice, and cautiously introduced into the vagina, carefully avoiding all hurry and rudeness. The finger will probably first reach the neck of the womb, now perfectly developed, covering the head of the child, and pressing somewhat down into the vagina. Passing over that towards the back part, the mouth of the womb will generally be found (in the beginning of labor) pretty far back, and high up. If it should not be well advanced, time should be given for its progress, but from time to time it would be well to ascertain its condition.

62. 7th. Should the pains be efficient and the mouth of the womb well dilated or open—the waters well pressed down during pain, let the membranes containing the waters be ruptured by the pressure of the finger against them during a pain; or by cutting

them with the nail of the introduced finger. When the head is passing through the soft parts of generation, it is of the highest importance to place the palm of the left hand against the vagina and anus, carefully *supporting* it, that there be no rupture; and when the head has fairly passed through, no effort should be made to withdraw the body of the child; its delivery should be trusted to the subsequent contractions of the womb, that this organ be not too suddenly emptied, and by this means give rise to *flooding*.

63. Should you deliver the woman while in the lap of another person, or on a straw bed placed on three chairs tied together, which is far better in slow or lingering cases, before you sit down it will be necessary for you to spread a folded sheet in your lap to keep you dry, and receive the child on delivery. Having passed through the conduct or active duties of the midwife during natural or unassisted labor, let me say in conclusion, never be too *officious* or *meddlesome* when all things go well; comfort, cheer, and encourage your patient with all that is kind and lovely, remembering that it is a time of trial and suffering of no small magnitude.

SECTION II.

DUTIES TOWARDS THE MOTHER.

64. Having conducted the labor to the delivery of the child, new duties immediately commence. The first great object is to see that respiration is established —for the most part this takes place the instant it is in the world; indeed it very often cries so soon as the head is protruded through the external parts. But if it fail to cry soon after delivery, attention should be immediately paid that respiration may be produced. In cases in which the cord still pulsates there is but little risk so long as this action continues; and for the most part all that is necessary, is to remove all impediments from the mouth of the child which may interrupt the passage of air to the lungs, or by dashing upon its body some camphorated spirits or brandy. But should there be no pulsation in the cord, the body limber, and especially, if upon dividing the cord—only a drop or two of black blood issues from the cut, the case is desperate, but not always absolutely hopeless.

65. We should in this case carefully remove any mucus that may be in the mouth or upper part of the wind-pipe, wiping it out with the little finger armed

100 DUTIES TOWARDS THE MOTHER.

with a piece of fine dry rag, or by holding the body and hips higher than the head, and gently shaking the child. In the second place, we should endeavor to inflate the lungs of the child, by forcing into them, by applying our *own* mouth to that of the child, and forcibly expiring; or we should endeavor to imitate natural respiration, by placing a napkin over the mouth, and pressing out the air from the chest afterwards. The child should always be kept warm by the frequent application of heated cloths. Still-born children have been resuscitated under very discouraging circumstances; therefore this should never be neglected, nor should it be too soon relinquished, but persevered in until the last moment of hope. Some children have been recovered after they have been born twenty-five or thirty minutes. The child, from being long delayed in the passage, or from having its neck tightly begirt or wrapped with the cord, may be still-born. In this case its face will be black, or livid and swollen—the arteries may have ceased to beat, or they may beat vigorously—in such cases nothing can save the child from immediate death but the instant abstraction of blood by cutting the cord, and should the pulsation have ceased, we may sometimes still succeed in drawing some blood, by forcing it from the cord.

66. Whenever respiration is established, either naturally or artificially, we should apply a *string* or *ligature* to the cord, provided the *beating* in it has ceased, but not until then. It should be applied an *inch or more* from the navel, and it should be drawn sufficient-

ly tight to make it sure, and then with a pair of *shears* or a sharp knife, the cord may be cut about an inch and a half from the navel; and the child handed over to some experienced person to be washed and dressed. Having performed this duty, the next is to deliver the **AFTER-BIRTH.** This is done by taking hold of the cord with the left hand, and gently tightening it, while the right fore-finger is carried along the cord until it reaches the after-birth, which is to be hooked with the introduced finger, and gently drawn by the cord with the other hand, until it passes through the external parts—we should then grasp it with both hands, and give it several twirls, to twist the membranes, that they may be entirely withdrawn from the womb. It is then carefully to be placed in a basin or pot, or if there is a good bed of coals, it can be easily despatched by burying it up in them.

67. If the womb does not readily contract, (which is easily determined by its hardness and size,) before or after the delivery of the after-birth, we should use brisk frictions with the open hand over the region of the abdomen, until the womb becomes very hard, and appears to be disposed to retire within the cavity of the pelvis. So soon as the woman is delivered of the after-birth, she should be put to bed, carefully removing all wet things that may be about her, and applying a good *bandage* over the abdomen, pinned as tightly as she can bear with comfort. This should be attended to immediately, unless she should be very much exhausted, fatigued, or sweaty; in that case it is better

to wait a while. *After pains* torment almost every woman, with the exception, perhaps, of those with their first child. These pains by the old women have been considered useful, because they are always accompanied by the discharge of coagula, which they say must come away; and on this account they oftentimes refuse to give any thing for their relief.

68. But this subjects the patient to most unnecessary tortures, sometimes for many days together, therefore they should be relieved as quickly as possible. Eight or ten grains of camphor every hour or two, mixed in a little syrup of any kind, will generally afford relief. Should this fail, it would be best to combine *Laudanum* or *Opium* with it. The *regimen* of the woman should be strictly attended to for four or five days; indeed the midwife should most *imperatively* charge the nurse that she does not inflame her constitution by giving too many nourishing or stimulating things; as ardent spirits, wine, cordial, spices, animal food, broths, &c. These should not be used for the first four or five days, or until the milk has been fully secreted and is easily extracted, and very sparingly until after the ninth or tenth day. The *diet* during this time should consist of gruel, mush, or rice and milk, tea, coffee, or chocolate, seasoned with sugar and a little nutmeg or lemon juice.

69. The child should be put to the breast as soon as the mother is well rested; this is an important direction, and should not, without strong reasons, be neglected. First, the child's mouth will, by its gen-

tle action upon the nipple, gradually stretch it, and accustom it to extension before the breasts become tender and swelled with milk: secondly, by the nipple being stimulated by the child sucking, an earlier secretion of milk takes place, and the milk will be drawn off nearly as soon as formed, which will prevent the pain so constantly arising from its acclimation, as well as the swelling, which is almost sure to follow its formation. Thirdly, the child keeps the faculty of sucking with which it was born, which in a few days it will lose, and much trouble will be given to recall it: and Fourthly, the early secreted milk possesses a *purgative* quality, by which the infant profits by its assisting in carrying off the *meconium*.

70. On the third day, if the bowels have not been previously opened, the woman should take some mild purgative. *Castor Oil* is the best, but where this is disgusting, or should disagree, Rhubarb or Senna tea will answer extremely well. Also a strict attention should be paid to the state of the bladder. If there is a *retention* of urine, the *Sweet Spirits of Nitre*, in tea-spoonful doses, repeated every two hours, will generally afford relief in a very short time.

DUTIES TOWARDS THE CHILD.

71. Having spoken of the duties towards the mother, it becomes necessary to turn our attention to the necessary duties of the child. 1st. The child's body, when first born, is almost always covered with a tena-

cious, unctuous substance, which is rather troublesome to remove. It is, however, ascertained that *hog's lard* answers better than any thing else that we know of, to detach this substance from the skin. This is then, can be removed by strong warm soap suds and a piece of flannel. After this let the child be daily washed with water, and after completely drying the skin with a soft cloth, rub the child for a minute gently with the hand. The washing, clothing, and dressing of the child and navel, is not strictly the midwife's province; nevertheless, as it may be required of her, she must not be ignorant of the place she is called to occupy.

72. 2d. All that is necessary in dressing the navel, is to pass the remaining cord through a hole made in the centre of a linen rag six or eight inches in length, and about two and a half broad. This may be folded back so as to envelope the cord, and over this is pinned round the child's body, a *bandage or belly-band*. After this the child is dressed as fancy directs or as circumstances may force. 3d. For the purpose of purging off the *Meconium*, it is found that a little molasses and warm water is generally sufficient. Two or three tea spoonsful are to be given at once, and repeated from time to time, if the previous quantity be not sufficient—this rarely fails, especially, when aided by the early secretion of the mother's milk. If it should, a tea spoonful of *Castor Oil* will be found the best among the list of purgatives.

73. It is not right to throw into the child's tender

stomach harsh ingredients, or drench it with a variety of nostrums. The nurses should be instructed in regard to their *officiousness* in this matter—they should remember that it is better to give too little, than too much. 4th. The food for the child should consist of milk, and milk alone, provided the mother has it; and it should be borne in mind that nature provides milk as early as circumstances will permit; and on our part, the nearer we imitate nature, the nearer we approach to what is right.

74. There can be no objection to nourishment from time to time, meted in proper quantities, and composed of proper materials. But it appears that the kind nurse has but one rule by which she regulates the feeding of a newly born child, which is to pour food down its throat until its stomach can hold no more; it is then permitted to rest a short time until the poor babe cries; it is now imagined to be again hungry; it is crammed again until its stomach, stretched to overflowing, uses more discretion by throwing up its food than the nurse, who, without discrimination, taxed it to regurgitation. This is a horrible practice, and cannot be too severely reprobated.

75. Well, say you, what is the proper food for a child when it has to be fed? *New milk*, or what is called *strippings*, or what is far better, as it does not coagulate, a little fresh *cream* sweetened. This is best administered by means of a sucking bottle, as in this way the saliva is greatly promoted by the

action of sucking, is duly mixed and swallowed with the food. But, says the nurse, it throws up its milk, and I think it is too strong for its stomach, therefore, it must be *watered*.

76. Yes, I have seen these milk and water children with their bowels deranged, their limbs emaciated, and their mouth nearly as big as a cat-fishes, crying for a little good sweetened *cream*. It is an established law of the Medes and Persians, that the nearer we can imitate its mother's milk, the better for the child; and this can be better done with strippings and cream than anything else. I have thus traveled over the first part of this work connected with parturition, carefully avoiding speculations and abstruse matter, giving important items and facts, which will be useful to the heads of families, and instructive to those engaged in the practice of midwifery.

CHAPTER IV.—SECTION I.

ON NATURAL LABORS.

77. We are told that among the Indians of this country, the natives of Abyssinia, and the West India Islands, and, also, the ladies of Sicily, on finding their labors approaching, retire alone to some secluded spot, and there, without assistance, remain.

until they be delivered, when having washed their infants, and bathed themselves in the next stream, they return to their cabins and their occupations. It is said, amongst these, few women are known to suffer any ill consequences from labor, or to die undelivered. At any rate it must be confessed women in general, especially in a state of society and refinement, endure more pain, are exposed to greater difficulties and dangers, and meet with more accidents from labor than the savages, or any other animals, yet we have reason to believe that much of this is owing to misconduct.

78. I have long been convinced of one important truth that the mismanagement, pride, and extravagance of this age, cause more labor, anxiety, pain and disease than all other things put together; and yet how few will *retract* their course, and *conform* to the simple laws of nature and propriety. We may fairly conclude that Beneficent Providence has endued women as well as other animals with powers which, when unimpaired, are equal to all her natural functions and relations.

79. The classification of labor is altogether *arbitrary*, scarcely two writers agreeing upon the same arrangement. There cannot be any one employed which may not be liable, some to more and others to fewer exceptions. I shall, therefore, divide them into three classes. 1st. NATURAL, 2nd. MANUAL, and 3d. INSTRUMENTAL. 1st. NATURAL LABOR includes those which most frequently occur. They

consist of 1st. those cases in which the child presents the HEAD; 2nd. those in which the BREECH OFFERS; 3d. those in which the FEET OFFER; 4th. those in which the KNEES OFFER.

FIRST STAGE OF HEAD PRESENTATIONS.

80. Although labor is in reality one continued process from beginning to end, and there is naturally no intermediate state or suspension between any one period and another, yet for the sake of precision in treating of it, it will be convenient to divide its progress into *four stages*. The first stage commences with true labor pains, and ends when the internal orifice of the womb is completely dilated, about which time the membranes commonly break and the waters are discharged. The duration of this first stage of labor is very different in different women, and in the same women at different labors, but in general it requires more time with the first child than those which follow; and in well formed women it generally takes up more time than any other stage of labor. But during this stage, if all things are right, we should leave nature to her own unassisted, undisturbed efforts. The midwife is to encourage her patient by appearing perfectly calm and easy herself, without hurry or assumed importance, assuring her that as far as can now be discovered, all matters are perfectly natural, always, however, remembering that she can neither lessen her patient's pain nor shorten its duration.

81. She is to direct her to walk about her chamber or from room to room, to sit or lie down as she finds most agreeable to herself, and if she can, to sleep between her pains. It is not uncommon to find the parts dilating slowly while the woman is in a horizontal posture, and for labor to advance with rapidity upon the woman walking about or being seated upon a chair, in which posture, the weight of the ovum making a greater resistance to the contractions of the womb, assist in dilating the internal orifice. This is far better than to be following that abominable practice, of *boring, scooping, and stretching* the soft parts of the mother, under the preposterous idea of making room for the child to pass. Much speculation has been indulged in, to account for the frequency of "*head presentations.*" Undoubtedly this is for the greater security of the animal to be born, expelled or liberated, and is not peculiar to the human race, for it is the same in the inferior animals, reptiles, and the oviparous products.

82. Thus, Virey found, in the multiparent animals, that the snouts or noses were turned, in the horns of the uterus, towards the vulva; in the viper, the mouths of the young were found placed towards the external parts; so in the egg, the head of the chick is always directed towards the big end. The same obtains in the ova of fishes; so, also, in the larvæ of insects, the head always escapes first; the chrysalis eats through its shell, and the caterpillar through its silky covering. The frequency with which the head

presents, compared with any other part of the body, renders its various positions better known, and also entitles them to be considered as the most natural. Yet even *head* presentations have essential differences, as they are not all equally advantageous. Sometimes the *posterior* fontanelle or opening of the head, can be discovered towards or rather before the centre of the pelvis, and tracing the longitudinal suture we can discover the anterior opening of the head backwards and a little to one side; and the ear can be felt under and a little to one side of the pelvis, we may then be certain that the presentation is perfectly natural.

83. Sometimes it is the reverse of this, and sometimes it is so that the *large* diameter of the head enters the superior strait or brim of the pelvis parallel to the *small* diameter of the upper strait. This renders it less favorable than either of the other positions. Some writers have made *six* or more presentations of the head in the superior strait of the pelvis. I have carefully considered them all—some I would reject for their learned parade, others for being perplexing to the memory, and this without conveying any essential *practical* information. In order to understand the different presentations of the head, we only have to determine the position of the openings of the head, and the direction of the sutures.

84. The *crown*, therefore, will be distinguished from any other part by its roundness, its firmness, its sutures, and its openings. The most favorable position is when the head of the child rests on the

brim of the pelvis with the hind part towards one groin, and the face turned near the joining of the pubic bone of the opposite side, according to the diagonal diameter of the pelvis. Though the midwife should not make herself uneasy, as there are few or no presentations of the head which nature, left to her own efforts in a well formed pelvis, will not rectify or overcome.

SECOND STAGE OF LABOR.

85. This stage of labor commences with a full and complete dilation of the internal orifice of the womb, and is ended when the child's head has sunk through the brim of the pelvis so low as to begin to rest upon and distend the soft parts of the mother. In the first stage of labor the pains are cutting, sharp and grinding, the patient is restless, bears them with impatience, and expresses her sense of them by sharp and shrill cries; but in the second stage the pains become more supportable, and the patient finds herself instinctively called upon to make some voluntary exertion, she lies quiet, holds her breath, and expresses her sense of pain in a grave tone of voice, or bears them in silence.

86. It is during this stage of labor that the child's head, which enters the pelvis diagonally, with one ear towards the pubis and the other towards the back part, that is, the narrowest part of the head towards the narrowest part of the pelvis, it turns as it descends

where it finds most room, until the face is brought into the hollow behind, and the crown, the smallest or most pointed part of the head to the external orifice. If the head is large and the pelvis narrow, the bones ride over one another as the head is forced through the brim, and the shape of the head becomes more oval and pointed. In a perfectly well formed pelvis and a small child, this stage may end in a few minutes, but if there be a disproportion between the head of the child and the opening of the pelvis, it may require hours.

87. Should this stage be long, the woman should not be confined to one posture, but indulged and even encouraged occasionally, to rise from the bed, to walk about, &c. This is a period when the impatience and apprehensions of the patient are frequently much excited. In tedious cases the pain returns at short intervals, and are strong and bearing, she longs, and hopes, and strives for a speedy termination, and it requires much prudence, and no little management, to check her impatience, and regulate her conduct. You should, therefore, sooth her sufferings, calm her fears, excite her hopes by all the encouragements her case is justly entitled to.

THIRD STAGE OF LABOR.

88. The third stage of labor begins at the time when the head of the child, having sunk through the pelvis, begins to rest on, and distend the soft parts of

the mother, at which time, the crown presents at the external orifice, and the forehead and face occupy the hollow behind; and it continues until the soft parts being distended into the form of a large protuberant tumour: the external orifice is so far dilated as to suffer the head and body of the child to pass through without injury. This stage is generally accomplished in a short time, however, the woman should be placed in some permanent position as directed before.

89. The pains during this period, while the soft parts are undergoing so great distension, become more severe, and at last when the child's head is passing the external orifice, are most exquisite. The part which is most apt to suffer during this period, is that portion of the *perinæum* which extends from the anus to the external orifice which for the extent of one inch or an inch and a half, and the thickness of the hand, is stretched to that of four or five inches, and reduced to the thickness of paper, so that in the most natural and well conducted labor, it will sometimes give way at this extremely thin edge.

90. Let it be remembered, that this part should *always* be supported by placing the palm of the left hand against it firmly, until the head and shoulders have fairly passed through, that there be no rupture. There is little danger of the perinæum being torn when the child's head passes slowly through the soft parts, therefore, in very rapid cases it should be kept back by placing the right hand upon the protruding part of the child's head. Just before the birth,

head is often found to advance during the pains, and to retire again as they remit, and this alternate advancing and retiring is frequently of infinite consequence to the safety of the perinæum; at this time the sufferings of the patient are extremely severe, at the highest, but after the delivery of the head, a short respite ensues, but the pains soon returning, the shoulders are perceived as they descend to make the same turns as the head had done just before. The next pain or two advances it to the hips, and another short respite now takes place while the hips advance, and with one or two pains more the delivery of the child is accomplished.

FOURTH STAGE OF LABOR.

91. The last stage is taken up in the care of the infant, in *tying* and *cutting* the navel-string, and in receiving or gently aiding the delivery of the placenta membranes. After the child is delivered, let it lie in any easy posture close to the mother, so as not to put the cord too much on the stretch, with its head and body covered, and its face and mouth exposed to the air until it breathes and cries, and until the pulse in the naval-string has ceased, or at least become very feeble, after which tie the cord in *two* places with a strong thread, one about two inches from the child's body, the other about two inches above that, and take care to cut it between the knots, as errors on either side might be fatal, if below the first knot, to the

child already born, if above the second, in case of twins, to that in the womb.

92. After the child is delivered a short respite ensues, but the pains soon return: then take hold of the cord and gently tightening when the pain is on, the after-birth will soon come away. I seldom ever have had to wait more than ten or fifteen minutes, but sometimes it may happen that you may have to wait an hour or more. After the woman is completely delivered she should be immediately put to bed; the *broad bandage* having been put around her, and a soft cloth well wet in camphor spirits the temperature of blood heat, or well greased with hog's lard, applied to her.

93. The dangerous practice of making the mother rise to her feet or walk to the bed, cannot be too highly censured. Perfect quietude, silence and sleep for some hours are useful, if not necessary to every woman after delivery, in order to recover from fatigue, and allow the womb to resume its natural situation. By such prudent management, in at least ninety-nine cases out of a hundred, nature will be found perfectly equal to a safe and happy delivery, and it will be accomplished with as little pain, and in as short a space of time, as is consistent with the woman's safety, and the best interest of her dearest friends.

SECTION II.

PRESENTATIONS OF THE BREECH.*

94. The presentation next in frequency is that of the *breech*, and it is a good rule to treat of labors in the order of their frequency. The breech may, with great propriety, be considered as a variety of natural labor, since the woman most frequently is able to relieve herself, if we except, perhaps, a first child, though the process may be longer and a more painful than when the *crown* presents in one of its best manners. This presentation is more favorable for the child than either the feet or knees, especially in first labors, though the operation generally speaking is slower, and perhaps more fatiguing to the mother. It is in the latter part of this kind of labor while the head is passing, that the hips of the child are brought into most danger, and this arises from the delay in the delivery of the head, and the *compression* of the cord. This delay more especially depends upon the bad position of the head, as regards the pelvis, or from the rigidity of the external parts.

95. The presence of the breech at the orifice of the womb, can not be very well ascertained or distinguished before the membranes are ruptured, and the womb pretty well dilated. Under proper circumstances it may be known by its forming a large, softish

* Out of 20,517 births, 373 presented the breech.

tumor in the pelvis, which wants the characters of the head, with which it is alone liable to be confounded, for it has neither the sutures, nor the hardness of this part, nor the roughness of the hairy scalp. A deep groove is observed in the centre of this part, which, when traced, leads to the detection of the anus and the parts of generation. A discharge of *meconium* after the membranes have given way, tends to corroborate and confirm the presence of the breech.

98. It must, however, be confessed that there is sometimes a great deal of difficulty in deciding whether the presentation be the head or the breech, particularly when the head is very tumid or swollen. There are several varieties of this presentation, as well as of the head, and it so happens that the greatest diameter of the head traverses the smallest diameter of the superior and inferior strait. These labors are necessarily slow and tedious, and in many cases where the child is large in comparison with the pelvis, the child's life will be lost. When the breech has passed a sufficient distance through the external parts, the legs of the child fall down, and the remaining portion of the body, by the excessive contraction of the womb, descends to the armpits where there is a momentary interruption (at the superior strait) to the farther descent of the body of the child, occasioned by the size of the shoulders and position of the arms; but from the pliant disposition of these parts it is but temporary, for they are made to accommodate themselves to the shape of the pelvis by the repeated contraction of the womb.

97. When the body has passed on to the external parts it is entirely from under the direct control of the action of the womb; the voluntary powers *alone* have an influence on it at this period of labor, and though the external force may, and almost always does become necessary to terminate the labor, it must always be made to co-operate with those powers by soliciting the woman to exert them as amply as may be in her power. It must be remembered, that the *perinæum* in these cases is more apt to be torn or ruptured, and therefore, must be well *supported* by the hand.

SECTION III.

PRESENTATION OF THE FEET.*

98. The presentation next in order of frequency is that of the *feet*; these are with propriety ranked among the natural labors, because the woman is enabled to deliver herself. These cases are generally easy and safe to the mother but *dangerous* to the child; and that danger arises from the *compression* of the cord, which cannot happen until the hips and body be delivered. Very little assistance is necessary in these cases until after the child be delivered as far as the hips. The presentations of the feet are readily

*In 20,517 there were 234 feet presentations.

distinguished from all others, by there being no other parts of the child which resemble them; the hands alone bear any analogy, but from the hands they are easily told by the projecting heels, the short toes, and especially by the absence of the thumb. It is worthy of remark here, that the midwife be particularly careful before she makes use of any force in extracting, to distinguish the *feet* from the *hands*, as she might inevitably do mischief, and render the case more difficult.

99. The feet being small will frequently descend through the internal and external orifice before there be much dilatation or relaxation of the parts. When the child shall have advanced as far as the hips, we are then to consider how it lies in the womb, and this is to be discovered by the position of the toes. If they point obliquely backwards towards the mother, the position is then the most favorable; if not, it will then be necessary to begin during every pain to turn it a little, or rather to suffer it to turn spontaneously, so that the fore-part of the child shall be to the back of the mother, by the time the arms and head come to be delivered. At the same time be careful to attend to the navel-string; relax it by drawing it down a little so as to save it from as much pressure as possible.

100. It may, perhaps, be proper to remark that in these presentations the feet and legs do not hang loose or dangle in the pelvis, but on the contrary, the thighs are flexed against the abdomen, the

legs forced against the thighs, while the heels are almost always, placed against the breech, or are in its immediate vicinity. It will be readily perceived that one foot cannot well descend without the other. Should more than two feet be found in the passage, as in twin cases, (this rarely occurs, or it seldom happens, that the membranes of both give way at the same time, or before one of the children is delivered,) we must be careful to select those which belong to the same child. This sometimes creates more difficulty than would at first be imagined, for simply selecting a right and left foot by no means proves that they belong to the same body, and if they should not, much inconvenience may be experienced. It would be well in these presentations to apprise the friends of the patient of the risk the child must inevitably run in its delivery, that no blame be attached to the midwife.

SECTION IV.

PRESENTATIONS OF THE KNEES.*

101. The presentations of the *knees* are very rare indeed, and I might, perhaps, have passed them over in silence, without incurring much censure for the omission. Until the membranes be ruptured, and the mouth of the womb properly dilated, it cannot well be ascertained that the knees offer. They may be distinguished when together by their similarity, and the roundness of the long angles they form. When but one presents, which is most commonly the case, it is not so easy, but we may trace the leg and find by this means the feet which puts the matter out of doubt.

102. The mechanism of these labors is precisely the same as those of the feet, for the latter must be quickly developed if the labor proceed, and they are reduced to footling cases. It is generally the case as the child advances that the breech will descend in proportion to the advancement of the knees, and if it does, the knees will almost certainly be arrested against some portion of the pelvis, in which case, the contractions of the womb, and the efforts of the woman are almost sure to be unavailing, though continued for hours. I think it always best to bring down the feet and knees by pushing up the breech, unless the mouth of the womb is sufficiently dilated,

*Of 20,517 births there were only 4 of the knees.

and the feet are found to unfold, or the knees to advance, in this case we may trust the labor to nature.

103. I have now finished what I have to say on *natural* labors with the exception of *twin cases*. I have carefully and regularly considered them all, and arranged them in such a manner that they can be easily comprehended and understood by every capacity who will think, reason and judge. And I hope to be credited when I declare, that more mischief is done, more pain and misery occasioned, and more broken and shattered constitutions are produced by the untimely interference of art, by handling, boring, and stretching the parts, than by all other things put together. And could I persuade the parturient patient of this one fact, she would not be soliciting, teasing, and crying to the midwife for so much *help*. She should remember, that Beneficent Providence has so ordained and decreed, that for her to become a mother, she *alone* must suffer, bear and endure her *own* pain, while her dearest and most intimate friends and neighbors can only sympathize, cheer and encourage her in the most desponding, trying and painful states in which she can be placed. Therefore, though most labors are perfectly natural, and require but little to be done, you should nevertheless, *procure* good, experienced, and efficient help, that it may be upon the *spot* in case of some unforeseen accident, that your life be not jeopardised or trifled away, when proper and timely help might have been afforded for your relief.

SECTION V.

OF TWINS.

104. Under this head I shall consider pregnancies composed of two or more children. *Twins* are of rare occurrence, so much so as to render it difficult to establish the proportion between them and single births. But in this country, according to the best account, the average is about one in *seventy-five*. The climate, or the state of civilization, seems to exert an influence upon the multiplication of the human species, and that where the means of life are more abundant, or more easily procured, the proportion is probably increased. Women who are more than ordinarily large are apt to suspect themselves pregnant with twins, but the extraordinary size of the abdomen—the division of the abdomen into tumors upon its anterior surface—the swelling of the inferior extremities after the third or fourth month—the numerous places at which the woman feels motions or stirrings, are not *positive* signs or indications, but may only be considered as strong presumptive evidences of twins, as the whole of these signs have been known to exist without the woman being pregnant of twins.

105. The uncertainty whether the woman be pregnant of one or more children, fortunately, is of no consequence until the labor has positively commenced, for previous to this time our conduct in every

respect should be the same as if there were but one child. But at this period it would in many instances be extremely useful when the children were offering untowardly, as the cause of difficulty would then be ascertained, and the indications fairly declared. It is worthy of remark here, that each child generally is enveloped in its own *membranes*, and has its *waters* and its *after-birth*, though sometimes they may be enclosed in one common covering of membrane, and inhabit the same *nidus*, and float in the same waters, at other times they adhere together; or are connected by interposing membranes, and should be delivered together. After the expulsion of the first child, the rules of practice in twin cases are to proceed to the delivery of the second in the same way, governed by the same rules. It generally happens that after the birth of one, that the pains will pretty quickly ensue and deliver the other, if its position be natural, or there will be a suspension of pain for a short time, and they will come on more rapid than before, and expel the second child much sooner than the first, as the tonic and spasmodic contractions are more powerful, because this alternate action is concentrated upon one instead of two children, the parts having been previously dilated, there will be less resistance to overcome.

106. One thing should be constantly borne in mind, that *speedy* deliveries are attended with more danger than lingering ones. 1st. Because the womb has not had time to contract and lessen itself down to

that small sphere that will close the mouths of the bleeding vessels, from whence arises this unusual *floodings*. 2nd. Because the parts were rapidly put upon the *stretch* before they were properly prepared, and hence they will not so readily return to their healthy state. Then as the womb has been more distended in case of twins, it must have more time to contract, therefore, nature, the best and wisest physician, orders that these twin cases should have longer time to accomplish their work. And in all cases where there is much *floodings*, you should reasonably conclude that the womb has not contracted down so as to close the mouths of the bleeding vessels, therefore, *brisk friction* should be made over the region of the abdomen; also *two strings* should always be applied to the cord (as directed par. 91) in all cases where you suspect twins.

407. You should not make any attempt to deliver the first after-birth, (unless it is loose in the vagina,) until after the birth of the second child, and then you should take hold of the cord, pulling gently but pretty firmly by the cords, but not with equal force on each—if you do, you tend to bring both placentaæ at the same time to the mouth of the womb, and their united bulks will not readily pass it—you should, therefore, act more firmly upon the cord FIRST out, as it is more than probable that its placenta is nearest the orifice and will more easily descend, and at the same time bring the other with it.

PART III.

2ndly.—MANUAL LABOR.

Under this head I shall include PRETERNATURAL or DIFFICULT cases which require the HAND or ART to deliver them, and also to the mode of operating in such cases.

CHAPTER I.—SECTION I.

PRETERNATURAL OR DIFFICULT LABORS.

108. Many causes may render a *natural* labor, a *preternatural* or *difficult* one, or it may be essentially bad from the beginning, owing to the untoward situation of the child. This may, therefore, be both accidental and unavoidable, or they may be rendered so by mismanagement. A labor may commence with every prospect of being speedily and successfully terminated, but after a continuance for a longer or a shorter time with the fairest promise, the patient may be assailed by some accident which puts in jeopardy her life or that of the child, or both, and from which nothing can save them but the well di-

rected and timely interference of *art.* Let me say to the midwife, that it is in tedious and laborious cases of midwifery, that her knowledge, her patience, her humanity, her fortitude, and her integrity, will be put to the severest trial; her knowledge in forming a cool and deliberate judgment of the case before her, her patience, in yielding a long and painful attendance on a case which she will be too apt to imagine, may, by a little interference, be speedily despatched; her humanity and fortitude in bearing and resisting the distressing complaints and apprehensions of her suffering patient—and her integrity in permitting no consideration, whatever, to interfere with her present duty, to which she must be prepared to sacrifice her time, her pleasure, her ease, her interest, and even her reputation; or she is unfit for this profession, and should turn her thoughts to another.

109. One of the most common, and at the same time one of the most alarming accidents is, 1st, *flooding*: Should this take place in the early part of labor, and before the mouth of the womb be sufficiently well opened for the purpose of delivery, we should attempt to moderate the discharge by rest, a horizontal posture, by cold applications, by plugging up the vagina and mouth of the womb with a sponge or some other soft substance, or by giving a few drops of *Laudanum* with two or three grains of *Sugar Lead* occasionally. Should the flooding take place when the orifice of the womb is well dilated, or easily dilatable after the waters have been discharged,

we should proceed to turn the child and bring it down by the feet, if there be not a speedy prospect of delivery by the natural way. 2nd. *Convulsions* may attack a woman after labor has commenced, and under precisely the same conditions of the womb as has been stated above: after *copious blood-letting* if these do not subside, and the womb be perfectly open, we should turn, and deliver by the feet. 3d. In cases of extreme *faintness* or when the powers seem to be too tardy in cases of *rupture*, we should also expedite labor by turning and delivering speedily by the feet. 4th. We find in some *obliquities* and partial contractions of the womb it becomes necessary to turn and deliver.

110. It sometimes happens that though the crown may present, yet its untoward position may be such that the *great diameter* of the child's head may not correspond with the greater diameter of the superior strait, and in some cases of this kind it may be expedient to turn and deliver by the feet. We may lay it down as a general principle that in *all cases*, whatever, where the head is not pressed down in the pelvis, and the probability that the child will not be speedily delivered, if any untoward or dangerous symptom should arise, which will jeopardise the life of the mother or child unless they be speedily delivered, we should endeavor to turn and deliver. This, however, can never be done with propriety unless the mouth of the womb is dilated, or is easily dilatable—if previous to this time bad and dangerous

symptoms occur, we should endeavor to allay and prevent them by the use of the best means and remedies we possess, and wait patiently until we can accomplish the delivery by the introduction of the hand.

111. It so happens, sometimes, that the shoulder presents at the superior strait, and one or both arms protrude through the orifice. This gives the midwife great uneasiness, and sometimes much trouble, but it should be borne in mind, that the presence of the *arm* is only an indication that the shoulder presents, and you should not injure the arm for it will do no good, if the arm was taken off it would not better the condition, therefore, if you are present when the waters discharge, you should endeavor to prevent the arm from coming down by pushing up the shoulder, and if you cannot get the head to present you should always bring down the feet. Sometimes you may be called when the arm is already protruded, in that case let the arm *alone*, introduce your hand and bring down the feet. *Face* presentations are difficult and slow in every stage of their progress, and sometimes like every other kind of labor they must be turned and delivered by the interference of art. But in all untoward presentations if no very bad symptoms arise, give ample time for nature to accomplish her work—you will also find other parts of the child to present, when there is little or no probability that delivery can be effected in any other way than by changing its improper position, and bring down the feet.

112. *Tedious* labors are more apt to follow women with their *first* child, although young and well formed, than the succeeding ones. The same delay happens more certainly, and in a greater degree when women are advanced beyond thirty years of age before they have a child. Also very *fat* women are observed to be subject to slow labors from a remarkable feeble action of the womb with which their labors frequently begin, and in cases of twins, and some in which the womb is over-distended by a very large collection of water—a slow labor follows from the same cause. *Fever* during labor may be the consequence of long delay, or an unusual rigidity of the soft parts may be present, therefore, in such cases, the treatment should consist of rest, cool air, cooling regimen, open bowels, empty bladder, blood letting, and the occasional use of opium, aided by such remedies as will promote a kindly moisture of the skin.

113. It sometimes happens that the womb so effectually closes immediately on the delivery of the child that the after-birth is retained, and cannot, without great injury to the mother, be delivered at the time, but in these rare cases it has been known to come away of its own accord on the second or third day while the woman was making water or on the stool. *Premature* delivery is almost always attended by more or less delay, though in cases of deformity of the pelvis when there is no probability that the child can pass through the cavity of the pelvis at the period of *nine* months, it may be advisable and proper

to rupture the membranes at the end of seven months or later, and bring on labor, by which means, we can often save the life of the child and mother: But this should not be done unless it be positively known by a previous labor, that a living child cannot be born at the full term of gestation. It happens sometimes that labors are rendered slow and tedious by the shortness of the cord, and by its being wrapped around the neck, which prevents its ready descent. At other times we are much embarrassed by the deformity of the woman's pelvis—enlargement of the head by dropsy, tumors upon some part of the child, &c., &c.

114. All these may occur, but they are of so *rare* occurrence that a limited practice might never come across these cases. In the "Hospice de la Maternité," in Paris, by Madame Bovine, one of the superintendants, of 12,751 births, 11,216 were of the most natural presentation, with the crown to one or the other groin, 92 with the head differently situated, and 1,433 preternatural. These calculations prove that it is seldom necessary to take a case of midwifery out of the hands of nature; but they prove too that there are cases in which the unassisted is absolutely unequal to the delivery, and in which, but for the interposition of *art*, both the mother and the child must necessarily perish. It becomes, therefore, equally our duty to consider what experience has taught us on this head, and in all cases, especially in this "enlightened and moneyed age," procure a competent person to attend

132 TURNING AND DELIVERING BY THE FEET.

to this department of business, and let me say, in conclusion, to those who officiate in this branch of business, should you meet with an extreme case, call on some good, judicious aid, which instead of wishing to rise and make money on your precaution and kindness, will help you in delivering the suffering patient.

SECTION III.

TURNING THE CHILD AND DELIVERING BY THE FEET.

115. This is an operation seldom attended with much difficulty and danger when done at a proper time and in the right manner: 1st, give your patient a good dose of *Laudanum* and wait until it begins to affect her, then place her on her back at the edge of the bed with her feet supported on the lap of assistants: the operator kneeling or setting on a low seat before her with the hand and parts well lubricated with *lard* or *fresh butter*—the fingers collected into a cone in the time of a pain, gently and slowly introduce into the vagina, and then, in the absence of a pain, gently slipped into the womb, and carried in

the direction of the feet, while the other hand externally fixes the womb steadily, when you have gained the feet, if you cannot get both, one, however, will answer, and generally the child can be turned with nearly as much ease by one as by both. It is better, however, when only one foot can be had, to bring it to the entrance of the vagina, and secure it by a fillet, while search is made for the other.

116. It will be recollected that the most natural presentations is the most common, and that in that case, the child's head is at the brim of the pelvis, with the face and belly to the back of the mother, the knees bent to the breast, and the feet and breech towards the upper part of the womb. The feet should be conducted in such a manner as will make the toes constantly look towards the abdomen of the child, (this should be remembered) as no attempt should be made to turn the child during a pain, but after the feet are without, every advantage should be taken of a pain, and the feet should be brought through the external parts in such a manner as will place the toes towards the anus of the mother, and when it is drawn downwards until the navel-string appears, a loop of the cord should then be drawn without, that it may not be injured by being put too much upon the stretch. The child should be made to pass through the arch of the pubis with its spine looking towards, or pressing against either the right or left leg of the pubes, that the head may enter the superior strait obliquely: this must be done by a little turn of the body, if it does

134 TURNING AND DELIVERING BY THE FEET.

not place itself in this situation as we continue our tractions downward.

117. Little difficulty is experienced in delivering the child thus far. The *arms* now begin to make some resistance, but you must pass a finger or two upon the point of the shoulder, and pressing it pretty firmly downwards, and then tracing the arm to the elbow, this we endeavor to bend by pressing it on its internal surface exactly opposite the joint, and at the same time urging it downward and forward toward the face of the child, when it will almost always disengage itself, and fall into the cavity of the vagina, from whence it is easily delivered by hooking it forward with the point of the finger, the other arm will be delivered in the same way. Having delivered the arms, lay the body of the child on your left arm, and passing two fingers of that hand into the vagina, introduce them into the child's mouth, and draw the lower jaw down a little, then extend the fingers above the mouth on each side of the child's nose, at the same time, place the fingers of the right hand across the child's neck, and with this purchase, cautiously extract during the pain, or from time to time in imitation of the pains when there are none, sometimes pulling gently downwards, and backward, again upward and downward, and from side to side, and as it descends, raise the back of the child toward the belly of the mother with the nape of the neck against the pubes, the face will turn out, and the delivery will be finished.

118. The *perinæum* should always be supported by an assistant in the last part of this process, and gentle pressure over the region of the womb, will greatly aid its contraction, and thereby prevent *flood-ing*. It will be readily seen that in deliveries of this kind, the child must run a considerable risk whenever there is the least delay to the delivery of the head. This danger arises from the compression of the cord, also of the head and chest, and from the severe extension, and sometimes from the unguarded twisting of the neck more than it can naturally turn. When necessity obliges us to terminate a labor either well or ill begun, let it be remembered, that *caution and dexterity* are more necessary than *force*, and that kindness, sympathy, and moderation, should characterize the conduct of the operation from beginning to end.

SECTION III.

INSTRUMENTAL LABORS.

119. Agreeably to my plan I have divided labors into—1st. NATURAL, which usually come on at the full period of *forty weeks*, or *nine calendar months*, in which the head most commonly presents, though sometimes the *breech, feet and knees*. The progress

is regular, and is accomplished by the unassisted efforts of nature, and completed usually within twenty-four hours. 2ndly. MANUAL, (which means by the hand or interference of art.) Under this head I have included PRETERNATURAL when the child presents the arm, shoulder, thigh, back, belly, or any other unnatural part. I have also included DIFFICULT or TEDIOUS LABORS which were rendered so by local and constitutional causes which prolong or interrupt the natural process of labor, and require the assistance of art to accomplish the delivery.

120. I come now to speak of, 3rdly. INSTRUMENTAL, by which I mean cases that are terminated by the use of instruments. According to the report of the Hospital at Paris, 17,308 women which were delivered, of these 16,286 were perfectly natural presentations, 230 only of these were delivered by art, (one in $76\frac{1}{2}$,) 161 by turning, on account of preternatural presentation, 49 by the forceps, (one in $353\frac{1}{4}$,) 13, (or one in 1332,) by the crotchet, and in all these, the death of the child was first ascertained. *Baudelocque*, one of the greatest advocates of the *forceps*, confesses that he is not very far from believing that this gentlest, (as he calls it) of instruments, has been more fatal than useful to society—that even the *forceps* have destroyed more than they have saved. Also, *Dr. J. Clark*, seven years master of the Dublin lying-in hospital, assures us, that out of 10,387 cases delivered during that period, only fourteen occurred in which the *forceps* were necessary, and that he is fully convinced

the danger arising from tedious labor is seldom lessened by the common expedient of extracting instruments.

121. This shows how *cautious* we ought to be in pronouncing a case one which must be terminated by the use of instruments: and inasmuch as I am writing for the common people, of common and every day occurrences, I have thought proper to say in conclusion, that should these *rare* or *extreme cases* fall under your care, it would be well for you or your patient to call on some more experienced aid. This is the course we pursue in all the common avocations of life or circles of society, we appeal to higher and more experienced workmen or councils, in hope of helping and bettering our condition. And why not in *difficult* cases in the practice of midwifery? I wish the practice was more common than what it is, but in these United States, our bumps of *self-esteem* are too largely developed for the best interests of society and the common good of the commonwealth.

TREATMENT OF DISEASES OF CHILDREN.

PART I.

CHAPTER I.—SECTION I.

WORMS.

1. All nature teems with living creatures. The air, the earth, and the sea, all abound with life. The atmosphere we breathe is frightened with myriads of insect-eggs, that elude our senses. The *skin* which surrounds the body, is the receptacle of a numerous progeny, which breed and burrow, and cause that troublesome disease called the itch. So, also, the internal linings, the bowels, are accordingly infested with *five* distinct species of worms, which have a *spontaneous generation*. It is here they meet with a proper stimulating power and soil to quicken them into life. They readily find a nest in the mucous which is secreted by the intestines, in which they involve themselves, and feed and breed, until they often form a large family of these irritating and troublesome creatures.

2. 1st. THE LONG THREAD-WORM is from an inch and a half to about two inches in length, and not much larger than a hair. These worms are seldom numerous and are principally found in the large intestines.

2nd. THE MAW, OR THREAD-WORM.—This is a very small white worm, and is found only in the large lower intestines, where they are often collected in almost countless numbers.

3d. THE LONG ROUND-WORMS.—These are from two or three to ten or twelve inches in length, round, of a yellowish white color, of nearly a uniform thickness except at the point. These are the worms which mostly annoy children—inhabiting the small intestines, and occasionally ascending into the stomach.

4th. THE BROAD TAPE-WORM.—This is from thirty to forty or more feet in length, is flat, white, and composed of a series of concatenated joints resembling a piece of white tape, and inhabits the upper portion of the bowels and stomach.

5th. THE LONG TAPE-WORM.—This worm is often of incredible length, and is the most common species of tape-worm, and is passed off in pieces of a greater or less number of joints.—It inhabits the stomach and small intestines.

3. SYMPTOMS.—Countenance pale, and lead colored, with occasional transient flushes, eyes dull, with pupils dilated, with a bluish semi-circle around the lower eyelids, tickling in the nose, tumid upper lip, headache, sleep disturbed by dreams, and broken off

by fright and screaming, convulsions, feverishness, thirst, bad taste in the mouth, grinding of the teeth, offensive breath, variable appetite, cough, emaciation, transient pains in the stomach and bowels, frequent slimy stools or costiveness, urine turbid, yellowish or milky, abdomen full and hard, tongue furred, occasional nausea and vomiting; the surest indications are a discharge of worms from the stomach and bowels. The *broad* tape worm produce the severest mischief in the body. The maw or thread worms are generally extremely annoying, particularly in the evening soon after lying down, they usually occasion a very distressing itching in the anus.

4th. CAUSES.—The cause of the generation and increase of worms may be traced to a sedentary and inactive course of life, habitual exposure to a humid atmosphere, the abundant use of fat, mealy articles of diet, fresh milk, the use of more food than the stomach can digest. They are commonly met with in persons of weak, enfeebled or irritable habits, and, therefore, prevail much more extensively in children than in adults, in women than in men. They are quite prevalent in families which use their food very fresh, and which labor under a weak state of the digestive organs. I have had occasion to observe that the stomach as well as the womb, is the great organ of sympathy, and associates in affections of the most remote parts of the system. This is particularly the case with respect to the irritation produced by worms, and especially, those that exist in the stomach itself.

or the upper part of the bowels, hence many diseases are influenced or occasioned by worms. Epilepsy, dropsy of the head, convulsions, palseys, fevers, dropsys, &c., all may occasionally be the result of the irritation of worms.

5th. TREATMENT.—In prescribing for the removal or destruction of intestinal worms, it is of considerable consequence to confine the patient to a spare and liquid diet, and give one or two purgatives a few days previous to the exhibition of the proper expulsive remedies. 1st. The removal of the *thread worms* which inhabit the lower bowels, is attended with some difficulty, though once removed for the time, they almost always return again and again in those who are once infested with these worms. The best mode of prescribing for the expulsion of these troublesome worms, is to give three or four *alætic* purgatives every second day, and use injections of lime-water and milk, or what is still better, injections of spirits of *Turpentine* mixed with milk: aloes or other vermifuges will do for injections.

6th. 2nd. For the removal of the common *Long Round-Worm*, take an ounce of *Pink-root* to a pint of water boiled down to half a pint. This being sweetened is to be drank in the course of three or four hours: as soon as the whole of the decoction is taken give half an ounce of *castor oil* and a fourth of an ounce of the spirits of *turpentine* to a child of from four to eight years old. This will rarely fail. If it should, repeat the oil of turpentine. From four to eight drops

or twenty to forty grains of the seeds of *Jerusalem oak* is a valuable remedy. Half a tea spoonfull of the *Cowhage Down* twice a day for several days has succeeded well. Two or three grains of *camphor* dissolved in an ounce of water and sweetened, may be given three or four times daily for several days. This, though simple, is very efficacious to expel and prevent the generation of worms. The *spirits of turpentine*, from half an ounce to an ounce, stands on the list of vermifuges as high as any thing we possess. This should be given with milk, coffee, or other fluids.

7. 3d. For the expulsion of the *Tape-worm* we generally give the root of *Male Fem*, *Filings of Iron*, *Valerian*, the bark of the pomegranite root, *spirits of Turpentine* or the empyreumatic oil of *Chabert*. Whatever mode of treatment be adopted it is always of much consequence to prepare the patient by a spare and liquid diet, and the daily use of small doses of saline purgatives for four or five days, and then commence on one or the other of these vermisfuges, and repeat them daily until you have expelled the entire worm. To prevent the rapid reproduction of worms after they have been expelled or destroyed by vermisfuges, recourse must be had to *tonic* bitters. The *Worm-moss* is, perhaps the most valuable; an ounce of this sea weed with a little *valerian* should be boiled in a pint of water down to one gill. Of this a tea-spoonfull may be given every morning, noon and evening, with peculiar advantage to children laboring under worm affections arising from mere debility of the digestive organs, and vitiated secretions in the bowels.

11. BOTANIC DEPARTMENT.—The principal *indications* of cure consist 1st, in dispelling the worms from the intestinal canal; 2nd, preventing their reappearance, and 3rd, strengthening the general system and giving tone and action to the stomach and bowels.

TREATMENT.—When called to a case of worms if severe it is best to give a strong tea of jerusalem oak, or pink root, for several hours, and then follow it with a purgative dose of senna, castor oil, extract of white walnut, boneset or aloes. The bowels should be poulticed with bitter herbs, as balmony, tanzy, rue, wormwood, bitter root, &c., at the same time injections of bitter decoctions will greatly aid in the expulsion of the worms. In more mild cases the bitter tonic medicines will generally be sufficient. All of the *bitter extracts* are excellent agents for removing of worms and for strengthening the alimentary canal. *Oils*, as wormseed, olive, cedar, juniper and linseed, are serviceable. The different balsams, as turpentine, fir, pine, lice, &c., have occasionally been given beneficially. Cowhage down, male fern, salt and lime water, have been used, and no doubt, in many instances, with decided benefit. One thing must be borne in mind in the successful treatment of worm cases, that is, the whole alimentary canal must be strengthened and the system in general must be rendered healthy, active and vigorous before much can be effected in permanently removing or preventing the generation of worms. Whatever then will most conduce to this end will prove to be the best vermicifuges.

It is not only the expulsion but the prevention of these irritating intruders that the honest physician seeks to accomplish. Thus suitable medicines should be given to those who indicate the presence of worms before necessity absolutely compels them to seek for immediate relief.

SECTION II.

DIARRHŒA OR LOOSENESS.

8. We are now to enter on the consideration of that important class of diseases, which is known to the world under the familiar denomination of *Bowel complaints*. Diarrhœa or looseness is an affection of the bowels—a very common disease, and is met with in every country—in every class of society—in every age and season of the year. It prevails more in the summer and autumnal months, particularly among children. It is characterized by too frequent, too copious, too liquid, feculent and slimy stools, with more or less murmurings and griping pains in the bowels, dryness of the skin, and sometimes sickness at the stomach.

9. *The immediate cause* of looseness consists in an increased peristaltic motion of the intestinal tube; therefore, any thing that will irritate the mucous or lining membrane of the bowels will excite the disease,

and this may result of causes acting on them *directly* or *indirectly* through the medium of the general system. 1st. *Directly*, by taking foreign matter or substances in the stomach, or by irritants formed or engendered into the stomach or bowels. Among these may be enumerated irritating and indigestible of articles of food and drink, acrid or vitiated bile, acid generated in the bowels, worms, fresh acid fruits taken to excess, intemperance in eating or drinking, &c.— 2nd. *Indirectly*, it may occur from sudden changes which turn the perspiration in on the bowels *cold*, particularly when applied in a humid way to the feet or abdomen, is one of the most common and powerful causes of looseness. Besides these there are many other local and general causes of producing violent and protracted looseness. Dentition or cutting of teeth, diseases of the liver, lungs, and other parts of the body, in the last stage of measles and many other diseases, sudden emotions of mind, excessive fatigue, late hours, irregular habits, &c.

10. TREATMENT.—In the treatment of diarrhœa, the first thing is to enquire into the cause, the progress, the length of time it has continued, the age, constitution and debility of the patient, and decide upon the treatment according to each particular case. First, there are *three* principal indications to be attended to in the treatment. 1st. To remove the irritation in the intestines. 2nd. To allay the morbid irritability of the lining *coat* of the bowels. 3d. To diminish the flow of blood to the intestinal canal. To accomplish

these ends, 1st. regulate the diet or give liquids or soups, *rice water*, toast water, chicken or beef tea, wear flannel or warm clothing, and keep the body as much at rest as possible. If the exciting cause is improper diet, vitiated or redundant bile, acrid or offensive ingesta, no hopes of procuring relief can reasonably be entertained, unless those irritating matters are removed out of the bowels by gentle physic, and the irritation allayed by soothing means. This can be effected by *Castor Oil* or *Rheubarb* or its tincture, after which, *Paregoric* or *Bateman's Drops and Prepared Chalk* will frequently effect a cure at once. *Ipecac* is sometimes useful in clearing out the stomach and determining the fluids to the skin. If looseness is produced by a sudden chill on the surface, or cold which turns the perspiration in on the bowels, a restoration and maintainance of that perspiration on the skin, will be peculiarly proper. This can generally be done by giving a decoction of *Butterfly Weed* or *Pleurisy Root* or *Dover's Sweating Powders*. When a looseness is accompanied with a pale and fretful expression of the countenance, a hard and tumid abdomen, frequent picking at the nose, voracious or changeable appetite, and the discharge of indigested portions of food in the stools, it must be considered an affection of a more serious import, in such cases it is greatly increased by the irritation of worms in the bowels, then the *Worm Moss* is, perhaps, the most valuable; and other medicine for worms ought to be given.

11. Very frequently looseness is increased or sus-

tained by impaired digestion in consequence of a weakened state of the stomach and bowels, requiring in this case stimulants or astringents, such as gum kino, cinnamon, spices, aromatics, &c. Sometimes, however, the disease assumes a chronic character and becomes exceedingly obstinate to manage. If it is of long standing, it requires more active astringents, such as the infusion of Blackberry Root, Crow's-Foot, but above all the *Butterfly-root* followed by the constant use of *Prepared Chalk* mixed with *Bateman's Drops*. Should the disease pass into a highly irritable condition or chronic inflammation of the bowels, characterized, by tenderness or soreness to the touch in the abdomen, astringents or active purges will be decidedly improper. *Frictions* over the abdomen, warm bath, camphor spirits or turpentine rubbed over the abdomen will be highly serviceable. Looseness from cutting teeth ought not to be checked or stopped suddenly, unless quite severe, it will frequently change to dropsy of the head, or some other complaint, and hence you will incur a worse disease than the former. Should the disease be the result of some other malady, as consumption, it can only be palliated by soothing means until the complaint is cured. Children or weakly persons ought to accustom themselves daily to the use of the *cold* or *warm bath*, particularly the *cold* during the warm season. It will invigorate and strengthen the system, relieve and prevent bowel complaints, and keep the system free from many other diseases.

12. BOTANIC DEPARTMENT.—The *indications* of cure are to restore an equilibrium of vital action, allay the morbid irritability and strengthen the intestinal canal.

TREATMENT.—At the onset of the disease there is, perhaps nothing more speedy or effectual than a free use of warm drinks, injections, and the vapor bath. When the disease has continued long and become chronic, those remedies must be repeated often and aided by emetics, tonics, astringents, &c. When it proceeds from improper food the intestinal canal must be cleansed by courses of medicine and when it is induced by worms, anthelmintics must be given, and where it is caused by morbid irritants, give allspice, cloves and cinnamon or bayberry, hemlock and sweet gum barks. In all cases great attention should be paid to the surface, always remembering to regulate the diet, clothing and exercise to suit the age, season, and habit of the patient.

SECTION III.

CROUP OR HIVES.

12. This frightful disease is peculiar to young children, generally between the first and fifth year of age. Some families are especially liable to it, and a child having once been attacked is very liable to its return. It is not contagious, but sometimes prevails epidemically—

is more common near the sea coast, and marshy districts—occurs more frequently in the winter and spring than in the other seasons: florid, robust and fat children are much more predisposed to the disease than those who are of an opposite habit. The disease consists of an inflammation of the mucous membrane of the superior portion of the respiratory tube. The inflammation usually commences in the fauces or back part of the mouth and descends thence into the wind-pipe, and occasionally even in the tubes of the lungs, terminating after a longer or shorter period from the commencement in the formation of a *false membrane*; which, according to the latest and most accurate observations, appears to consist of a concrete, albumenoid, or muco-purulent matter. This false membrane or frothy mucous sometimes in a few hours blocks up, or cuts off the passage of vital air into the lungs.

13. SYMPTOMS.—This disease sometimes comes on suddenly, and acquires the utmost degree of violence in the course of a few hours. More commonly, however, its approach is gradual, the first symptoms being those of common catarrh, and sometimes ulcerated sore throat. A dry and hoarse cough with slight difficulty of breathing, and a change of the voice, are generally the first intimations of its invasion. This very peculiar hoarse, rough cough, oppressed breathing and slight fever, continues sometimes for several days. Sooner or later the disease advances rapidly to its state of full developement, and all the symptoms

acquire a most alarming and distressing degree of violence. The respiration becomes difficult and oppressive. The *crowing* noise or cough becomes more ringing or sonorous—the countenance flushed, the pulse frequent, tense and quick, the skin dry and hot, the head thrown backwards, much thirst and extreme restlessness prevail.

14. CAUSES.—The *exciting* causes of this disease are *colds* or sudden change of atmosphere, dressing children so as to keep the neck and upper part of the chest perfectly bare, and thus rendering them more liable to the injurious influence of *cold* in these parts. We have already seen that the immediate cause was the formation of a mucous membrane in the windpipe, by the irritation of which, a spasmodic contraction or closing up of the respiratory passage was affected.

15. TREATMENT.—The cure demands prompt and active remedies; and it is obvious that the general indications to be kept in view in its treatment are—1st. To subdue the local and general inflammatory action as speedily as possible; and 2nd. To promote the discharge of viscid and coagulable secretions which are lodged in, and obstruct the superior portions of the respiratory tube. 1. *Blood-letting*, then, is our principal reliance, especially in extreme cases. This should be promptly and copiously attended to, particularly where the local and inflammatory action is strong—where the pulse is hard, quick and vigorous, attended with a dry and sonorous cough and respira-

tion. Such cases are apt to terminate in the formation of a false membrane in the wind-pipe, and our efforts ought to be prompt and vigorous to reduce the inflammation below the grade necessary for the formation of this viscid, limpid, membranous matter.

16. *Emetics* are important remedies in this disease, and may indeed, be regarded as indispensable in its remediate management, assisted by warm baths, blisters or some other irritating substances to the throat of the patient. You can frequently subdue mild attacks of the disease without the aid of blood-letting. The *Lobelia* I believe to be the best emetic in this disease. *Tartar emetic* stands second. The *Blood-root*, *Ipecac*, *Squills*, &c., are also valuable.—*Calomel* has been recommended by some very highly. *Senaca Snake-root* and *Liver of Sulphur* are articles which have been recommended highly in this affection. The following mixture, as an *emetic* in croup, after proper depletion, has been practiced:

Infusion of *Seneca Snake-root*, four ounces.

Syrup of *Ipecac*, one drachm.

Oxymel of *Squills*, three drachms.

Tartar Emetic, two grains.

Take a table spoonfull every fifteen minutes, until free vomiting is produced.

Purgatives and *Warm bath* are useful auxiliaries in the treatment of this disease. Blood-letting, Emetics, Warm-bath, and applications to the throat, should often be repeated in the commencement of the disease. Some cases have been suddenly checked by giving

large doses of table *salt and vinegar* so as to puke rapidly. Of late *cold* bathing, and, especially, the application of cold water to the throat by means of a bladder, has been introduced, and highly recommended. I cannot speak in reference to this matter, having never tried it.

13. BOTANIC DEPARTMENT.—The *indications* o cure are mostly 1st. to relax the spasms ; 2nd. to discharge the mucous in the throat and 3rd. to promote the action to the skin.

TREATMENT.—Commence giving Lobelia tea in combination with composition, until you produce thorough vomiting after which injections and the vapor bath should be administered. The patient may then be purged and drink plentifully of pleurisy root, rattle root or boneset. If the difficulty of breathing still remains, in a short time give Lobelia and vomit the patient again and follow it with injections and the bath until a natural and healthy action is fully establishing.

SECTION IV.

DROPSY OF THE HEAD.

17. This complaint occurs most commonly during childhood, and the period of dentition is the age of the greatest aptitude to the disease, and it is rarely known to extend beyond the age of twelve or fourteen

and it seems more frequently to arise in those of a serofulous and rickety habit than in others. It is an affection which has been observed to pervade families, affecting all or the greater part of children at a certain period of their life, which seems to show, that, in many cases, it depends more on the general habit, than on any local affection or accidental cause. The essential features of the disease consist generally in an inflammation of the membranes surrounding the brain, terminating in a serious effusion or *collection* of water within the ventricles, or upon the surface of the brain.

18. SYMPTOMS.—It may be divided into *three stages*, 1st. The *first stage* may be called the *irritative* period for, in the forming stage, the symptoms are those of an *irritated*, rather than an inflamed condition of the brain. During this period, the patient is wakeful, irritable and fretful, evincing a repugnance to strong light: the pupils of the eye are contracted; the patient often cries or screams out, starts or awakes out of sleep suddenly. 2nd. The *second* set or train of inflammatory syptoms more unequivocally direct our attention to the head as the seat of the disease. The patient complains of transient pains in the head, the restlessness and irritability increases, the pulse quick and active, tongue white, skin hot, and fever remitting, cheeks marked with a circumscribed flush, the eyebrows knit and frowning, and the eyelids generally half closed, tremulous motion of the arms and a tossing of them to the head, picking of the nose, grinding of the teeth, and rolling about of the head, bowels

commonly torpid, and sometimes relaxed, impatience of light and noise, and contracted pupil, great uneasiness when the child is raised, and while in an erect position more or less vomiting, and occasional delirium. 3d. After an indefinite period, these inflammatory symptoms are succeeded by a new train, making the third or last stage of *effusion* or *congestion* of the brain. The patient generally lies insensible, and when roused, speedily relapses into the same somnolent state. One arm and leg lies palsied, whilst the others are more or less moving—the pupils are dilated and the eyelids suffused or reddish, and the eyes turned up under the upper lids during sleep, pulse slow and full, both hearing and seeing lost, coma, convulsions, and death, speedily supervene.

19.—**CAUSES.**—It would seem, that in some instances, a hereditary or constitutional predisposition to the disease exists. In general, children of scrofulous, irritable habits, with weak or deranged digestive powers, seem to be most liable to this disease. Among the most common exciting causes, are, blows, falls, or other injuries to the head, dentition and intestinal irritation on the brain, cold, worms, in short, whatever is capable of at once deranging the digestive organs and causing an unnatural determination of blood to the brain.

20. **TREATMENT.**—There are *three* principal indications to be kept in view in the treatment of this disease—viz: 1st. to moderate the general arterial action; 2nd. to obviate the local congestion and in-

flammatory action in the brain; 3d. to remove those causes of irritation which tend to keep up a preternatural determination of blood. *Purgatives* are accordingly among our most valuable means for preventing the full development of the disease, while it is yet in its incipient stage, and this is more especially the case in those instances which are attended with well marked signs of intestinal disorder. Castor oil, Epsom salts, Rhubarb, or Senna and Manna are very good purgatives for this purpose. Some have recommended Calomel very highly in this complaint. When the inflammation is once fully established in the second stage, Blood-letting ranks, of course, among our most efficient means at this period of the disease, particularly when the inflammation is the consequence of some injury inflicted on the head, or when it results from general causes, such as cold.

21. After which we should use *revulsive* and derivative applications, such as blisters to the back of the neck, while ice or cold water is applied to the top of the head, and warm mustard poultices to the feet.— After proper *pargation*, *depletion* with the lancet, and *revulsive* applications, Dover's Powder is valuable, particularly when the disease originated from irritation of the bowels. The tincture of Digitalis has been much used and in many cases will be highly serviceable. A decoction of *Indian Arrow Root* in this as well as other dropsies, will be the means of doing much good. *Green-tea* has a powerful tendency to lessen the morbid action of the brain. Should the progress

of the disease be fortunately arrested (which is seldom the case in the second and third stages,) the strength of the patient should be established by a nutritious diet, or tonic medicines, taking care to keep the bowels in good order, and the head cool.

14. BOTANIC DEPARTMENT.—The principal *indications* are, to equalize vital action, promote absorption, carry off the accumulated fluid, stimulate the surface, and restore energy to the whole system.

The plan of *treatment* most successful is to relax and change the whole system by the vapor bath, injections, frictions on the skin, cooling applications to the head, cleansing the stomach by active hydragogue cathartics, as gamboge, may-apple, jalap, bitter-root, &c., in combination with diuretics as squills, poplar bark, juniper berries, elder bark, horse reddish, &c., and in debilitated states of the system it is best to add other auxiliaries of the *tonic* and *alterative* kind. The *Indian Arrow Root* is admirably adapted to these dropsical cases and will mostly prove highly beneficial

SECTION V.

MUMPS.

22. This is a disease of common occurrence, mostly attacking children; generally prevailing epidemically, and is decidedly contagious. It consists in a specific inflammatory affection of the parotid

and other smaller glands. In general, it is neither a severe nor a dangerous complaint, though sometimes it is translated to the breasts in females, and to the testes in males, and in a few instances to the brain, and even proved fatal. It very rarely occurs more than once in the same individual.

SYMPTOMS.—It is first indicated by a feverish condition of the child, with a feeling of stiffness of the jaws, and a little swelling or pain either in one or both sides just behind and below the ears, extending down the neck. The swelling gradually increases until about the fourth day, at which time it gradually decreases, and in about seven days the child returns to its wonted health. Mastication and deglutition are always attended with considerable pain.

23. TREATMENT.—In mild cases little more is necessary than keeping the bowels open, the parts warm, the skin moist, confinement to the house, and great care must be taken to avoid taking cold. Should the inflammatory symptoms be violent, the breasts, testicles or brain become affected, more active evacuations may be necessary to prevent the destruction of these organs, *bleeding, purging, a blister to the neck, camphor spirits, or other stimulating liniments to the tumous, and keeping up a gentle perspiration on the skin, must be strictly attended to.*

15. BOTANIC DEPARTMENT.—The *treatment* should be increased or modified according to the severity of the case. In severe and difficult cases it is best to administer the vapor bath, a full emetic, and the swelled

parts should be poulticed with emollients as slippery elm, white pond lily, white beans, hops or salt. It is best to mix lobelia with the poultices, and in highly inflammatory cases it is best to give nauseating doses of lobelia. The bowels should be kept open, the surface and extremities warm.

SECTION VI.

MEASLES.

24. The Measles may prevail at all seasons of the year as an epidemic, but the middle of winter is the time they are the most prevalent, and they attack persons of all ages, but children are most liable to them. They prove most unfavorable to such as are of a plethoric or scrofulous habit. They seldom or ever affect persons but once in their life; and they arise from a specific contagion, the latent period of which is about eight days, varying, however, to ten, or even fourteen. Many individuals never become affected with the disease, however frequently they may be exposed to its contagion. It can readily be communicated by inoculation, and it is more regular and mild during the warm and equable seasons.

25. SYMPTOMS.—The initial symptoms do not usually differ from those which attend the beginning of catarrhal fever. A slight tenderness and redness of

the eyes with an increased flow of tears, sneezing, cough, and a watery discharge from the nostrils, together with slight creeping chills and transient flushes of heat, are generally among the first symptoms of the disease. The fever is of the inflammatory kind, the cough is at first dry and harsh, and is attended with oppressed breathing and some degree of soreness in the fauces. The pulse frequent, hard, and quick, and the skin dry and very hot. Generally between the third and fifth days the eruption makes its appearance in the form of small red spots, apparently popular, first on the forehead, chin, nose, and cheeks, and then successively on the neck, breast, body and extremities. These red spots, which resemble flea-bites, soon enlarge, and as their number increases, they run into each other and form large patches of an irregular or semi-lunar shape, leaving intermediate spaces in which the skin retains its natural color. Usually the fading and subsidence of the eruption proceeds over the body in the same progressive manner that it made its appearance, so that by the eighth day from the commencement of the fever, it begins to disappear, on the ninth day the desquamation or scaling off of the skin commences on the face, which by the tenth or eleventh day is completed over the whole body. About the time the eruption begins to decline, more or less looseness is apt to supervene.

26. SEQUELA.—There are few if any diseases which leave the system so susceptible to the injurious influence of cold as measles, and it is perhaps from

this circumstance that local inflammations and other affections are so frequent during convalescence. It is indeed a common observation, that the affections which are apt to follow an attack of measles are more to be dreaded than the disease itself. Scrofulous diseases of all kinds are apt to be roused into action. Dropsical swellings, discharges from the ears and boils on different parts of the body, inflammation of the lungs, eyes, throat, swelling of the glands, and consumption, &c., are frequent sequellæ of the disease.

27. **DIAGNOSIS.**—The disease with which this affection is most likely to be confounded is scarlet fever. In measles the rash rarely appears until the third or fourth day, the catarrh, cough, watery eyes and nose, sneezing, &c., are most conspicuous, whereas in scarlet fever, the eruption comes out generally in the course of forty-eight hours of the fever, and not unfrequently sooner.

PROGNOSIS.—Measles is not, in general, a very dangerous disease in itself. It is only from having its regular progress interrupted by some accidental cause as *colds*, &c., or being complicated with internal inflammations, scrofulous habits, pregnancy, or nervous, delicate, or debilitated subjects, that the disease is apt to assume a very dangerous character.

28. **TREATMENT.**—In relation to the treatment of this disease, we would do well to bear in mind this important truth, that we should be more fortunate in the main, in mild cases, if we interfered less with the operations of nature. She will conduct mild and

regular cases to a favorable issue without the interference of any other physician. In common cases all that is necessary, is to keep the bowels open by mild purgatives, and to allow the patient the free use of tepid, diluent drinks, and in instances attended with a very moderate degree of febrile reaction, some of the mil i, stimulating, sweating remedies, such as infusions of sage, elder blossoms, balm, elm, boneset, &c., should be ordered. In cases attended with a high grade of fever, moderate abstractions of blood are, without doubt, proper, and ought certainly not to be neglected. Small doses of antimonial wine with sweet spirits of nitre, the soda powders and snake-root tea, will be found serviceable. Where the rash, after it has come out, suddenly recedes, the warm bath, stimulating frictions of the skin, hot flannel or bottles filled with hot water applied to the body and extremities, drinking pleurisy or snake-root tea will generally bring it back to the surface. *Camphor*, especially, is a valuable medicine where a retrocession of the eruption occurs. In robust and plethoric subjects especially, a looseness of the bowels should not generally be interferred with. In cases complicated with local inflammation a vigorous treatment is promptly demanded. General and local abstractions of blood, blisters applied over the region of the affected part, mild purgatives and sweating remedies are all strictly indicated. Even in summer, during convalescence, the patient should not be suffered to go out of doors except in the middle of fine days, and not without

additional apparel. The diet during the declension of the disease and period of recovery, should be mild unirritating, and all kinds of stimulating drinks be carefully avoided.

16. BOTANIC DEPARTMENT.—There are *three* principal *indications* to be kept in view in the treatment 1st, to moderate the inflammatory action—2nd, to keep up an action the service, and 3rd, to mitigate bad symptoms in order to render the disease as mild as possible and prevent the sequelæ of the disease.

TREATMENT.—If the patient is cold and full of pain at the commencement the pulse small and feeble, you may give some warm aromatic teas, as ginger, composition, catnip, penny-royal, spearmint &c., but if there is considerable fever, give boneset, and lobelia, with some of the stimulant teas. If the eruption is slow in making its appearance, or by some other cause becomes obstructed, the vapor bath and diaphoretic articles should be given, as pleurisy root and rattle root, with composition or *diffusive* stimulants. Care should be used to keep the bowels regular, the skin moist and pliable, the cough down, and every function in a natural and healthy state.

SECTION IX.

HOOPING-COUGH.

40. Hooping cough occurs almost exclusively during childhood; spring and autumn appear to be

most favorable to the occurrence of this disease. It is highly contagious, and occurs almost universally in an epidemic form, and affects persons but once in their life. In general the *younger* the patient the more apt is the disease to terminate fatally. Hooping-cough, like measles, is indeed as much to be dreaded on account of the many affections which are apt to supervene during its course, or to remain after its disappearance, as for its own proper power, however violent it may be. Weak, delicate, scrofulous and consumptive children rarely survive the shock produced by this disease. When once it gets entrance into a family it generally attacks every child, and in its mildest form it generally lasts two or three months, and when severe is often protracted to six or seven, though like measles it has a tendency to run a certain course and wear itself out. The period of incubation, or the time which intervenes between the first impression of the contagion of Hooping-cough, and the actual commencement of the disorder varies from seven days to two weeks.

41. SYMPTOMS—It usually commences with the symptoms of ordinary catarrh. The patient at first experiences some degree of headache, sneezing, slight hoarseness, oppressed breathing, dry and ringing cough. At the end of two or three weeks the disease or cough begins to assume more of a convulsive or spasmodic character so far, at least, as the mere cough is concerned. The duration of the fits of coughing is very various. In some instances, the paroxysms are

generally over in less than half a minute, in others they last from five to six minutes, and often longer. In most cases the spell or coughing is attended with a discharge of viscid mucous, and often with vomiting. So violent in some instances is the fit of coughing that it induces a state of partial insensibility, and a most distressing sense of impending suffocation. The blood often bursts out from the nose and mouth. In this aggravated state, the disease usually continues from four to six weeks before it begins to abate.

PROGNOSIS.—Hooping-cough rarely terminates fatally, unless it gives rise to some local affection, or in scrofulous habits rouses some latent predisposition into action, and brings on a train of morbid disorders.—Children in variable and humid seasons, or in cold and northern climates, especially while *teething*, are apt to fall under this disease. Inflammation of the lungs, bronchial tubes, dropsy of the head, marasmus, consumption or scrofula are generally the sequelæ of hooping-cough. This disease like scarlet fever, measles and mumps, should always demand especial attention, not so much as to the *present* danger as the *future* diseases to which they give rise. *Let this be remembered.*

43. CAUSES.—There exists no other cause so far as we know, capable of producing this affection, than the peculiar contagion which is generated by the disease itself. It may be said that all these diseases must have primitively originated from accidental causes—for the first cause could not have arisen from

a contagion generated by the disease itself. Nothing, in truth, is more mysterious and incomprehensible, than the origin of those diseases which we now find to be engendered and propagated by a specific agent alone, elaborated by the living body actually suffering under the disease. The only solution we can offer, and it is indeed vague enough, is, that in the infinite combinations, of which the material elements of the universe are capable, agents may have been evolved by a peculiar concurrence of circumstances, which had the power of originating these disorders in the human system. It is in this way alone that we can give any plausible explanation of the occasional rise of new diseases—which, when once originated, propagate themselves by elaborating their own specific causes. Hooping-cough is undoubtedly a spasmodic or nervous affection, the *proximate* cause of which consists probably in a peculiar irritation of the eighth pair of the nerves.

44. TREATMENT.—It is supposed by some that the course of hooping-cough cannot be shortened or arrested in its progress; but this is not founded in fact.—*Emetics* constitute an important class of remedies in this and other respiratory complaints. They are peculiarly useful in throwing off the viscid mucous that clogs the respiratory passages. Lobelia, Ipecac or Blood-root constitute the best *Emetic* for this disease, and should be repeated from time to time throughout the course of the disorder. Assifotida and vinegar of squills are often highly serviceable. After the dis-

ease has been in progress for a time, the *Deadly Night-shade* is the most useful, prompt and energetic article to arrest its farther progress. One-sixth or one-fourth of a grain of the powdered leaves for a child, repeated three or four times daily will be sufficient. The dried root is somewhat stronger and will require less for a dose. It should be gradually increased and cautiously given. When hooping-cough excites local inflammation, local and general blood-letting ought strictly to be attended to. If in its advanced stage it should give rise to an inflammation in the respiratory tube *Balsam Copavia* will be most decidedly beneficial.—The diet should be light and digestible, and it is particularly important to guard the patient against the influence of cold, variable and damp atmosphere.

15. BOTANIC DEPARTMENT.—The plan of *treatment* consists in equalizing the circulation by courses of medicine giving anti-spasmodic teas and occasionally emetics to cleanse the stomach, and also soothing syrups to facilitate the expectoration. When any local affection arises in the respiratory tubes, balsamic preparations will be good agents. *Lobelia*, rattle-root and blood-root will often prove beneficial. Great care should be observed to prevent the rise of any local disease and to conduct by suitable means the favorable termination without exciting any of that peculiar morbid train of diseases which is so common to hooping-cough.

REMARKS ON THE PRESENT PUBLICATION.

It now only remains to say a few words in respect to the present volume. Every family who can read needs such a work; not to be read once and laid aside as a novel, but to be frequently consulted as a medical guide. A plain and systematic work that can be depended on for truth and accuracy, has long been wished for, and to the practising midwife, will be of incalculable benefit, and cannot be without its interest to all classes of community. A medical guide for the *heads* of families, and especially for *mothers*, is truly needed. How many annoying maladies prey upon the delicate female, which, with a proper understanding on the part of mothers, might be remedied without calling in the aid of physicians, and subjecting them to a long, costly, course of treatment, which might have been prevented at the very commencement with little medical attention. In this volume I have carefully given you a plain, concise, and practical work on the science of midwifery, and the symptoms, causes and treatment of those disorders peculiar to women and children, together with the medical properties and uses of the remedies used for the treatment of the diseases treated of in this book, scrupulously avoiding medical terms, false theories and speculations, and giving authenticated items and facts, which will be instructive to those laboring under disease, and usefu

to the heads of families. *Truth* is plain and can be easily told. *Few words*, and to the point, are better than a volume of a technicalities, and another volume to explain them. Much quackery exists *in and out* of the medical profession; therefore, what I have written I have been careful to consult the most *candid and standard* authors. To them I *appeal*, amidst a mercenary and alienated profession, and a disordered and skeptical world for the truth of what I have written. I know some persons wish to be considered learned and wise, because they can find fault and use big words and understand hard sentences, but I go for *simplicity* and *reform* in medicine. I am not strictly wedded to any system or mode of practice, but always endeavor to adopt that remedy which will relieve the quickest, and leave the system in the most perfect state of health. I have, therefore, made this publication to contain the germ or seeds of much new, interesting and useful matter. Study, then, this important book of facts without *prejudice*. It will make you healthier, wiser and happier while you travel through this short journey af human existence.

MEDICAL PROPERTIES, USES AND DOSES,
THE REMEDIES USED FOR THE CURE OF THE DISEASES TREAT-
ED OF IN THIS VOLUME.

PART V.

CHAPTER I—SECTION I.

REMARKS ON THE USE OF REMEDIES.

Every head of a family should be acquainted, not only with the properties of medicine and the diseases to which they are respectively applicable, but also with the art of *prescribing* them, so that they may be adopted to the peculiarities of individual patients, and by the mode in which they are administered, may produce the greatest curative effect with the least possible inconvenience. In the body of the work the quantity has been stated in which each medicine most ordinarily must be given to produce its peculiar effects in the *adult* patient. But there are various circumstances which modify the dose, and demand attention on the part of the prescriber. The age of the patient is the most important of these circumstances. The dose for a person of a middle age being a full dose.—That of a person from 14 to 21 years, will be $\frac{2}{3}$; 7 to 14, $\frac{1}{2}$; 4 to 6, $\frac{1}{3}$; of 4 years $\frac{1}{4}$; 3 years 1-6; 2 years

$\frac{1}{8}$; 1 year 1-12. To the above rules some exceptions are offered in particular medicines. *Sex, temperament, constitutional peculiarities*, have also an influence upon the dose, and should be kept in view in prescribing. *Females* usually require smaller doses than males, and those of sanguine temperament than the phlegmatic. *Habit* is another important circumstance which modifies the dose of medicine. *Simplicity* also in prescribing is always desirable when no object is to be gained by deviating from it. Remedies should never be mixed together without a definite purpose; and the form in which they are exhibited is often an object of considerable importance. They should be made to suit the taste of the patient or the condition of the stomach. Promptitude, order and precision should always be observed in taking medicine. Good prescriptions will avail but little where there is not good nursing and timely administration.

ASSAFCETIDA.

THIS is one of the most penetrating nervine stimulants. It operates slightly on the bowels, relieving pain, expelling wind, and allaying spasms and other nervous agitations. It is valuable in hooping-cough, phthisic, suppression and painful menstruation, but more especially in *hysteria*, *hypochondrical* and other nervous affections connected with a deranged state of the bowels and sexual organs. Dose from five to ten

grains. The tincture which is mostly used, given from one to two tea-spoonsful.

BALSAM COPAVIA,

Is a stimulant purge, and operates upon the urinary organs, and mucous membranes of other parts of the system. Thus it is occasionally given in chronic dysentery, catarrh, piles, but especially in *gleet* and *whites*. Dose, forty drops, three times daily, gradually increased to sixty drops.

SMART-WEED.

THIS is the most active agent we possess to re-establish the monthly discharge. While I was attending college I introduced this article to the medical profession, more especially to Dr. EBERLE, after which when writing on the retention and suppression of the menses, he says—"I can affirm, that with no other remedy or mode of treatment have I been so successful as with this." Boil the weed, strain the simmer down to a solid extract, or make a strong tincture.— Of this a teaspoonful should be taken four or five times daily, or from four to six grains of the extract may be taken every four or six hours.

BLOOD-ROOT.

THIS root continued in small doses will materially lessen the rapidity of the circulation. In large doses it is decidedly *emetic*. It is valuable in hooping-cough,

croup, and coughs following affections of the *lungs*, more especially bleeding from that organ; also in morbid affections of the liver and biliary derangements, particularly in chronic and long standing cases. In Rheumatism and asthmatic complaints, &c. It may be given in pills or tincture. Dose from one to five grains. For an emetic, from twelve to twenty grains.

BONESET.

THIS weed possesses important medical properties as an *emetic* and *purge*, and in smaller doses produces copious perspiration, and acts as a gentle tonic. In large doses it possesses active properties in arresting the ague and fever. In measles, common catarrh and acute rheumatism it is very serviceable. Pour a quart of boiling water on half an ounce of the leaves. A gill of this may be drank every fifteen or twenty minutes, until free vomiting is excited. Dose from fifteen to twenty grains as a tonic or sweat.

CALOMEL.

THIS article, though often abusd, is an active agent in the cure of *bilious* and *glandular* diseases. Its action is more or less terminated on the secretory organs. In large doses it is purgative, in smaller it is alterative. It is particularly useful in correcting the action of the biliary organs, and evacuating irritating and noxious matter from the intestinal canal. In dropsy of the head, and for the expulsion of worms,

it is also valuable. Dose from fifteen to twenty-five grains.

COLCHICUM OR MEADOW SAFFRON.

THE root, seeds and tincture act as a sedative on the nervous system, allaying pain and moderating the action of the heart and arteries. It is especially valuable in gout, *rheumatism*, *scarlet fever*, tumid leg and dropsy of the ovare. It must be given with much caution, and gradually increased and continued for some time. Dose of the root or seeds, from two to eight grains.—Tincture, ten to sixty drops.

FAMILY COMPOSITION.

TAKE one ounce of Aloes, one ounce of Canella Alba bark, one-fourth ounce of Rhubarb, one-fourth Cinnamon, one-fourth Anise-seed, and one-eighth ounce of Assafœtida. Pulverize and mix together. This certainly is one of the best preparations I ever used to keep up a regular action on the bowels and uterine organs. It is especially useful in deranged menstruation, hysteria, barrenness, and passive floodings from debility or relaxation of the general system. Dose from three to eight grains three times daily.

BLADDER COMPOSITION.

TAKE equal parts of Balsam Copavia, Sweet Spirits of Nitre, and Essence of Juniper. Mix together.—This mixture is valuable in painful and difficult men-

struation, and in most of the painful diseases of the *bladder* attended with a bearing down, and difficulty of making water. Dose two teaspoonsful two or three times daily with ten or fifteen drops of Laudnum.

EMETIC TARTAR,

As a *vomit*, is one of the most important articles we possess. Its effects are certain, prompt and energetic. It is certainly one of the most useful remedies in a long train of *febrile* and inflammatory diseases as a means of curbing the action of the heart and arteries, inducing a gentle perspiration, cleansing out the stomach and bowels, restoring an equilibrium in the system, exciting the secretions, and is capable of fulfilling many other indications in the cure of diseases: hence it is valuable in hooping-cough, hysteria, measles, &c. Dose from two to seven grains as an emetic. From a fourth to a grain as a febrifuge.

HIERA PICRA.

THIS holy bitter (as its name purports) is made of Aloes and Canella Alba bark, equal quantities of each, or prickly ash bark is nearly as good. Its virtues are much increased by adding one-fourth Rhubarb. It ought to be kept in a family and used as cases require. It is good in costiveness, colds, worms, dyspepsies, &c. It is best to put two ounces in a pint of spirits, from half to two tea-spoonsful may be taken morning and evening.

INDIAN ARROW-ROOT.

THIS is a valuable article in the treatment of dropsical compliants. It possesses tonic, and in large doses very powerful cathartic and diuretic properties. It stands pre-eminent in dropsies of the *abdomen*, ovaries and other local and general dropsies. Take an ounce of the bark off the root, and boil down to a strong decoction, sufficient quantities may be taken to purge actively, and repeated once or twice daily for some time.

IODINE.

IODINE was first introduced as a medicine for the cure of Bronchocele or the swelling and enlargement on the *fore part* of the neck. It has since been used with great success in scrofulous, indurated and glandulous complaints. It acts as a general excitant of the living actions, but particularly of the absorbent and glandular systems, and is capable of producing very important *alternative* effects, especially in dropsies of the abdomen, ovaries, and enlargements of the liver; spleen, breasts, testes, and womb, and glands of the abdomen, &c. It is also applied externally in these cases, and of late it is found to arrest speedily the progress of *erysipelus* when applied externally to the eruptive and spreading surfaces. The tincture should be given in sweetened water from ten to twenty, and gradually continued to forty or fifty drops three times daily, and increased for some time.

IPECAC.

THIS substance is undoubtedly the most important vegetable *emetic* we possess, and in many instances preferable to every other article belonging to this class, for it is much less apt to act upon the bowels, and to pass off by copious and exhausting stools than the preparations of antimony. In small doses it produces perspiration, acts gently upon the bowels, stimulates the stomach, exciting and facilitating digestion. This remedy was first brought into notice from its effects in *bowel complaints*, and since it is used in all cases where we need a mild puke. Dose for an emetic twenty grains.

PLEURISY ROOT OR BUTTERFLY WEED.

THIS valuable root when taken in moderate doses, produces gentle perspiration or profuse sweating, without heating the system, and enables a person to expectorate or raise powerfully: hence it has gained great reputation in common colds and catarrhs, both among physicians and patients. It stands pre-eminently celebrated in *pleurisy*, (whence its name,) and also in an inflammation of the lungs and the forming stage of consumption. It is slightly tonic and loosening, and possesses considerable power in arresting acute rheumatism, diarrhoea, dysentery, and some other diseases accompanying the cutting of teeth, such as puking and purging, loss of appetite, weakness, slow fever, &c. It is considered one of the safest, best and most effi-

cient means we possess, in arresting the progress of those diseases which are peculiar to the lungs. This root may be given in substance or decoction. The latter is, however, considered the best mode of administering it. Dose twenty-five or sixty grains.

OPIUM AND MORPHINE.

OPIUM is one of the most valuable articles belonging to the science of medicine. Taken by a healthy person in a moderate dose, it increases the force, fullness and frequency of the pulse, augments the temperature of the skin, invigorates the muscular system, quickens the senses, animates the spirits, and gives energy to the intellectual faculties. Its operations are extended to all parts of the system. In a short time this excitation subsides, a calmness of the corporeal actions, and a delightful placidity of mind succeed, and the individual, insensible to painful impressions, forgetting all sources of care and anxiety, and is conscious of no other feeling than that of a quiet and vague enjoyment. All the secretions with the exception of that from the skin, are either suspended or diminished, the regular motion of the bowels is arrested, pain and inordinate muscular contraction if present are allayed, and general nervous irritation is composed, if not entirely relieved. The local effects of opium, are of a similar character with those which follow its general operations. An increased action of the part is first observable, then a diminution of its sensibility and

contractility, and the latter effect is more speedy, more intense, and of longer continuance, the larger the quantity is applied. No medicine is so efficient in allaying nervous irritation, relaxing spasms, and quietting irregular muscular movements, as this article. Hence its great importance as a remedy in cramp, spasms, colics, painful menstruation, hysterics, coughs, &c. Also in suppressing morbid discharges it answers another indication which fits it for the treatment of a long list of diseases, bowel complaints, bleedings from the lungs, stomach, womb, and other organs, &c.,

MORPHINE—one of the properties of opium is less disposed to constipate the bowels, and leave behind the other unpleasant effects. It is usually also more acceptable to the irritated stomach, and will often be retained when opium or its tincture would be rejected. It is applicable to all cases where the object is to relieve pain, quiet restlessness, promote sleep or allay nervous irritation in any shape, but it is less efficient than opium in the suppression of morbid discharges. There is no medicine of which the dose is more variable according to the habits of the patient, the nature of his complaint or the purpose to be effected. The medium dose of opium is one grain. One-sixth of a grain of *morpheine* is about equivalent to a grain of opium.

SUGAR LEAD.

THIS is a powerful astringent and sedative. The principal diseases in which it has been exhibited are

bleedings, particularly from the lungs, intestines and *womb*. Its effects in restraining the discharges of blood, is admitted to be very powerful. It is also applied externally to superficial inflammations, bruises and burns. Dose from one to two or three grains repeated every two or three hours.

WILD CHERRY BARK.

THIS bark is among the most valuable of remedies. Uniting with a tonic power, the property of calming irritation, and diminishing nervous excitability, it is admirably adapted to the treatment of diseases in which a debilitated condition of the stomach or of the system at large, is united with general or local *irritation*. When taken into the system in moderate doses, and continued for some time, it gives tone to the stomach, and produces a slight increase of the action of the heart and arteries, and imparts vigor to the general system. When, however, it is taken in *large* quantities and frequently repeated, it reduces the pulse, and lessens the action of the heart and arteries. The use of *prussic acid* which, it is well known, is capable of moderating, nay, even of removing all the symptoms attending the early stage of consumption or hectic cough. Undoubtedly this bark will do as much of not more to relieve a patient from the *coughs, sweats, and general debility* in *consumption* than any other article known to the profession, the celebrated *Syrup of Naphtha* hardly excepted. It is also good in asthma, chronic hyste-

rics, *rheumatic* pains and swellings, and in many cases of ague and fever. The bark of the root is stronger than that of the trunk. The *cold* infusion is an excellent preparation. An ounce of the bark is to be infused in a pint of cold water for twenty-four hours. Dose a wine-glass full every four hours of from half to two drachms of the powdered bark.

SQUILLS,

WHEN taken excite raising and the urinary organs, and in larger doses emetic and purgative effects. They are the most certain, efficacious and valuable remedy we possess to excite the *urinary* functions, and for children, are an excellent *emetic*: hence it is useful in dropsies, coughs, colds, &c. They are generally given in combination with other articles, and steeped in *vinegar* and sweetened with honey. When given in substance, they are most conveniently administered in the form of pills from six to twelve grains as an emetic; or from one to two grains as an expectorant and diuretic.

SPIRITS OF TURPENTINE.

THIS oil stimulates the system, increases the urinary organs, expels *worms*, and when given in large doses operates on the bowels as a cathartic, and externally applied excoriates the skin, or blisters. Internally it is used in the low forms of fever and the relapsed stages of the ague and fever. In pains of the *stomach*

and *colics* it is certainly the quickest and most prompt remedy ever used. It is frequently used in disordered conditions of the alimentary canal and uterine organs. As a *vermifuge* it stands among the highest. In chronic rheumatism, sciatica and lumbago, the oil has often been given with great benefit. Externally applied it operates as a counter irritant, and relieves soreness and pain. Dose for a purge in case of *worms* from half to an ounce, and even more. For ordinary purposes from five to thirty drops several times daily.

SNAKE-ROOT.

WHEN taken into the stomach increases the force and frequency of the pulse, produces a glow of heat throughout the system, causes perspiration and raising, and excites more or less the uterine and other secretions. It is, therefore, valuable in difficult menstruation, croup, measles, and a variety of low, putrid and eruptive fevers. The dose of the powder is from twenty to thirty grains. It is usually given in infusion.

RHUBARB,

Is a peculiar and valuable article. It combines an astringent power with a cathartic. In small doses it invigorates the powers of digestion, and when the stomach is enfeebled and the bowels relaxed, at the same time that a gentle cathartic is required, Rhubarb, as a general rule, is preferable to all others. xxviii

its use in dyspepsia attended with constipation, in diarrhoea when purging is indicated, in secondary stages of cholera infantum, in chronic dysentery and in almost all typhoid diseases when fecal matter has accumulated in the intestines or the use of purgative medicine is necessary to prevent such accumulation. The tincture is better than the root in all chronic bowel complaints. Dose of the powder is from twenty to thirty grains. Dose of the tincture from a fourth to a third of an ounce.

VALERIAN,

Is gently stimulant, with an especial direction to the nervous system. It excites the action of the heart and arteries, promotes perspiration and tranquilizes the system. It is especially useful in cases of irregular nervous action, when not connected with inflammation or an excited condition of the system. Among the complaints in which it has been particularly recommended, are hysteria, hypochondriks, epilepsy, low forms of fever, &c. Dose of the powder is from thirty to sixty grains repeated occasionally.

SKUNK CABBAGE.

THIS is a stimulant and in most cases directs its action against spasmodic diseases, more especially in hysteria, spasmodic asthma, and other *spasmodic affections* of the abdominal muscles during the *expulsion* of the *fœtus* from the womb, or after delivery. It is best

given in powder, of which the dose is from ten to twenty grains, to be repeated three or four times a day, and gradually increased till some evidence of its action is afforded.

VERMIFUGES.

THIS includes that class of remedies which possess^s the power of destroying, dislodging, and expelling worms from the intestinal canal.

1st. PINK Root is generally considered among the most powerful vermifuges. It is best prepared for use by taking half an ounce of the root, and the same quantity of senna to ensure the purgative effect, boiling water, a pint. Steep for two hours in a covered vessel and strain. The dose of this infusion for a child two or three years old, is a fluid-ounce ; for an adult, from six to eight fluid-ounces, repeated occasionally.

2nd. JERUSALEM OAK OR WORMSEED is one of our most efficient remedies. It may be prepared by boiling an ounce of the fresh weed in a pint of milk, and given the same as the pink. Or the *seeds* may be administered in powder mixed with honey. Dose for a child from five to six years old, an eighth of an ounce. Or the *volatile oil* is perhaps more frequently given than the seeds. The dose for a child is from six to twelve drops, mixed with sugar.

3d. THE COWHAGE DOWN certainly possesses powerful vermifuge properties. These spiculæ are thought

to act mechanically by penetrating the worms.—Nearly a teaspoonful of this down may be mixed with honey or molasses, and given to a child once or twice daily for three days, and then followed by a brisk cathartic.

4th. MALE FERN is also a valuable vermifuge, and has been used more especially for the expulsion of the *Tape-Worm*. A third of an ounce of the powder may be given morning and evening for one or two days successively, and then followed by a full dose of some active purgative.

5th. CAMPHOR may be regarded among the most active and certain remedies for the expulsion and cure of worm affections. Three or four grains may be dissolved in an ounce of water and sweetened with sugar, and given several times daily, and continued for several days.

6th. THE SPIRITS OF TURPENTINE is undoubtedly one of the most certain of all the means we possess of directly removing worms. The full dose (in which it may *safely* be given even to children) is three-fourths of an ounce in milk or mixed in water, either by means of mucilage or honey. It is better to give it in large than small doses. It then passes off quickly by the bowels, otherwise it acts too much on the bladder.

7th. THE PRIDE OF CHINA is considered an efficient vermifuge. Boil four ounces of the bark in a pint of water. Sweeten to the taste and give half a fluid ounce every two or three hours.

8th. WORM SYRUP is a good agent to remove and

prevent worm affections. Take the most intense of the bitters, as wormwood, tansey, bitter-root, balmony, rue, meadow fern, &c., and make a decoction, strain, press and boil down pretty strong, add as much loaf-sugar, and give the patient freely this syrup.

SAPPINGTON'S PILLS.

Take <i>Sulphate of Quinine,</i>	40 grains.
<i>Gum Myrrh,</i>	10 "
<i>Liquorice,</i>	30 "

Pulverize fine, and moisten with a little water, and add just enough of the *oil of Sassafras* to impart an agreeable odor. This mass may be divided into *forty* pills, each pill then contains of *quinine*, one grain,—of *myrrh*, one-fourth of a grain, of *liquorice*, three-fourths of a grain. Dose, one pill, to be repeated every one or two hours or longer, to suit the case. For children these pills may be dissolved in water, whiskey, or what is still better, a weak solution of *elixir of vitriol*. For the use of these pills see "Eastman's Medical Practice."

LOBELIA.

LOBELIA INFLATA is a prominent, speedy and powerful relaxant. This power being evanescent and without injury to the living fibre, its most valuable services are rendered in the production of *vomiting*, the relaxation of *spasms*, contracted *sinews*, morbid *surfaces*, and is a great agent in relaxing the general

system in *febrile* and *inflammatory* affections, and in restoring an equilibrium of vital action in more local and circumscribed affections. It is capable of producing and sustaining a gentle perspiration on the skin, and when taken by the mouth and largely injected into the system will speedily relax the whole animal fibre; hold down fevers, inflammations without harm to the system, as there is no destruction of parts or extraction of vital fluid from the system, so soon as you cease to administer this relaxant the whole frame will speedily return to its accustomed tonic rigidity, and the functions of life not impaired, but having been relaxed will proceed with increased regularity and former strength. It stands pre-eminent in *Asthma*, *Croup* and *Coughs*, depending on spasmodic action in substance, tincture, or infusion. It is mostly used in the form of a *strong tea*. The dose of the powder as an *emetic* is from five to twenty grains, to be repeated at short intervals, if necessary. The *tincture* may be made by filling up a bottle of the powdered stalk, and then covering it with whiskey and letting it stand fourteen days, and when used, strain or pour off clear. The dose is usually half fluid ounce, warm water sweetened to the taste. It is frequently given as a relaxant in the form of pills. See *pill relaxant* in "Eastman's Medical Practice."

RYE SMUT—ERGOT.

This article possesses great power in increasing the

parturient action of the womb. Taken in proper doses it is capable by its prompt and certain operation of affording the most happy results in the hands of a judicious practitioner. When labor is protracted in consequence of feeble or irregular contractions of the womb, this medicine hardly ever fails to excite vigorous and effectual contractions. It is applicable where abortion becomes inevitable, in alarming bleedings, puerperal convulsions, lingering labors, retention of the after-birth, and to restrain bleedings after delivery. Where the doses are large it is very apt to excite nausea and vomiting. As a general rule it should not be used unless strongly indicated. It is best to commence with 15 or 20 grains, and then repeat the dose every fifteen minutes till its peculiar effects are experienced, or till the amount of a drachm has been taken.

SALT AND VINEGAR.

This mixture in large doses is decidedly emetic and purgative. It gives greater tone to the digestive organs in weakly children, and corrects the disposition to generate worms. In spitting or vomiting of blood, it suddenly arrests the discharge. It has a great tendency to arrest putridity, especially in ulcerated and putrid sore throat, and I have not found its equal in the whole range of medical science. Experience is said to be the best schoolmaster, and facts are stubborn things. No person who will venture to use large doses of this remedy in these *eruptive fevers* attended

with *putrid* or *ulcerated sore throat, scarlet fever*, or a disease that is sometimes called Black Tongue, will find himself disappointed. It should be given once or twice daily, in doses sufficient to ensure its emetic and purgative effects. Externally applied it will also be found valuable.

PREPARED CHALK.

This is an excellent antacid, and as the salts which it forms in the stomach and bowels are not purgative, it is admirably adopted to looseness and bowel complaints accompanied with acidity. With no other remedy have I been able to effect more good in *diarrhoea* in children during the warm weather in summer than with this simple article. I usually give two or three tea-spoonfuls at a time, three or four times daily, mixed with Bateman's drops at each dose, and continue for some time. At the same time bathing and rubbing severely the skin with *cold* or milk warm water.

DOVER'S POWDER,

Is made of one part of Ipecac, one part of Opium and eight parts of Sulphate of Potass. This is one of the most valuable *sweating* remedies belonging to the science of medicine, and is peculiarly serviceable in a variety of diseases where we wish to tranquilize the system and excite and keep up a regular and free perspiration on the skin. This preparation is applicable to all cases (not attended with much fever or excite-

ment in the stomach or brain) especially in painful affections or those connected with unhealthy discharges It proves a valuable remedy in chronic bowel complaints, colds, catarrhs, rheumatism and other inflammatory affections after a sufficient reduction by the lancet or other modes of depletion. The dose is from five to fifteen grains and often repeated.

SLIPPERY ELM BARK.

This is a soothing muscilage or demulcent and possesses nutritious and emollient properties. It is usually employed as a drink in the form of infusion, and is highly useful in excited and inflammatory affections of the mucous membrane lining the alimentary canal, and hence it is valuable in dysentery, looseness, and diseases of the urinary passages, and it is frequently applied to external inflammations in the form of emollient poultices.

FEVER POWDERS.

Take one drachm of Nitre, one drachm Cream of Tartar, and two grains of Emetic Tartar. It is best to dissolve this mixture in four ounces of cold water, and give about two tea-spoonsful every hour. This is an excellent cooling and sweating remedy in fevers and *inflammatory* complaints.

CAYENNE PEPPER,

Is a powerful stimulant, producing when swallowed

a sense of heat in the stomach and a general glow over the whole body. It is much employed as a condiment, and proves highly useful in correcting the flatulent tendency of certain vegetables, and bringing them within the digestive powers of the stomach. As a medicine it is useful in cases of enfeebled and languid stomach and debilitated state of the system. It is frequently mixed with spirits or alcohol, in combination with Gum Myrrh, forming an excellent stimulating preparation. The following formula is very useful in the treatment of *malignant sore throat and scarlet fever*: —Two table-spoonsful of the powdered *pepper* with three tea-spoonsful of common *salt* are infused for an hour in a pint of boiling liquid, composed of equal parts of *water and vinegar*. This is strained, when cool, through a fine linen cloth, and given in a dose of two-thirds of a table-spoonful every half hour. This same preparation forms an excellent *gargle*. Applied externally cayenne is a powerful excoreant to the skin and is very useful in local rheumatism, and applied to the feet in hysteria and low forms of fever when a stimulant impression upon the surface is demanded.

PERUVIAN BARK AND QUININE.

This valuable remedy was unknown to the civilized world till about the middle of the seventeenth century, though the natives of Peru are generally supposed to have been long previously acquainted with its febrifuge powers. It is unquestionably the most important tonic of bark, as administered in agues and fevers, is an eighth of an ounce, repeated every hour for six or

we possess, and justly ranks among the most useful and indispensable articles of the *materia medica*.—When taken into the stomach, the bark usually excites in a short time a sense of warmth in the stomach which often diffuses itself over the abdomen and the whole system; and if the dose be repeated, the whole system becomes more or less affected, and all the functions undergo a moderate degree of excitement. But besides the mere excitation of the ordinary functions of health, it produces other effects upon the system, which must be considered peculiar and wholly independent of its mere tonic operation. The power by which when administered in the intervals between the paroxysms of intermittent disorders, it breaks the chain of morbid associations, and interrupts the progress of the disease, is something more than what is usually understood by the *tonic* property; for no other substance belonging to the class, however powerful or permanent may be the excitement which it produces, exhibits a control or displays such extraordinary power over ague and fever at all comparable to that of the bark or its preparations. It may advantageously be used as a *tonic* in low or typhoid forms of disease in which either no inflammation exists, or that which does exist has been moderated by proper measures, or has passed into the suppurative or the gangrenous state. Also pains or diseases occurring periodically, are generally relieved by the use of bark. The medium dose eight hours during the intermission. When given as *tonic* in chronic complaints, the dose is usually much smaller.

QUININE.—This valuable constituent principle of the bark is almost universally employed in preference to the bark or any of its other preparations for the cure of agues and fevers. In all original cases it is best to prepare the system by Emetics and Purgatives for the exhibition of the Quinine; and if there is much inflammatory action present, by bleeding, but in relapsed cases it will seldom be necessary to use these preparatory means. In order to secure the whole effect of Quinine or bark and prevent its passing off too rapidly from the bowels, it is best to combine it with Bateman's drops or opium. Twelve grains of Quinine are equivalent to about an ounce of good bark. The dose varies exceedingly, according to the circumstances of the patient, and the object to be accomplished. As a *tonic*, simply, a grain may be given three or four times a day, or more frequently in acute cases. In agues and fevers, from twelve to twenty grains should be given between the paroxysms or chills, divided doses.

N. B. It is here worthy of remark, that Rowand's tonic mixture, Sappinton's pills, and all the celebrated nostrums which have flourished from year to year, for the cure of agues and fevers, owe their specific causes to the bark or Quinine they contain.

N. B. Nearly all of these remedies can be procured by your own hand, or they may be purchased at the druggists; and it is just as prudent, and economical to have the most needed at hand, laid up in store, as it is to provide food, raiment or implements of husbandry against the time of need.

ALPHABETICAL LIST OF REMEDIES.

CHAPTER II.—SECTION II.

Alder, black (*Prinos Verticillatus*) is a tonic and astringent. It is good in intermittent fevers, ill-conditioned ulcers, and chronic cutaneous eruptions. Dose 30 to 60 grains.

Aloes (*Aloe Spicata*) is cathartic and emmenagogue. Good in suppression of the menses and constipation. Dose, 5 to 10 grains.

Alum (*Alumen*) is astringent. Good in bleedings, morbid discharges and painter's colic. Dose, 5 to 20 grains.

Assafœtida is anti-spasmodic. Good in spasmodic affections, as hysteria, hypochondrical and other convulsive diseases. Dose, 10 to 20 grains.

Allspice (*Myrtus Pimenta*) is an aromatic stimulant. Good as an adjuvant to tonics and purgatives, and used in flatulency. Dose, 10 to 40 grains.

Alum-root (*Hencherra cortusa*) is astringent. Good in morbid discharges, ulcers and cancers. Dose 5 to 15 grains.

American Colombo (*Frasera Walterae*) is a mild tonic.

Good in weakness, debility, &c. Dose, 30 to 60 grains.

Angelica (*Angelica Atropurpurea*) is an aromatic tonic.

Good in flatulent colics. Dose 20 to 60 grains.

Augustura bark is a stimulant tonic. Good in debility, weakness, &c. Dose, 10 to 20 grains.

Aniseed (*Pimpinella Anisum*) is an aromatic carminative. Good in flatulent colics. Dose 20 to 30 grains.

Arbor vitæ (*Thuja Accidentalis*) is a stimulant tonic.

Good in intermittents, rheumatism, &c. Dose 30 to 40 grains.

Archangel (*Sycanus Virginicus*) is a bitter tonic. Good in intermittents. Dose 20 to 50 grains.

Arrow-root (*Maranta Arundinacea*) is a nutritious demulcent. Good in bowel complaints and diseases of the urinary passages. Used *ad libatum*.

Asparagus (*Asparagus Officinalis*) is aperient and diuretic. Used in disease of the heart and bladder. Dose, 1 to 2 teaspoonfuls.

Azerdarach (*Mela Azerdarach*) is cathartic and anthelmintic. Good in infantile remittents and verminose fevers. Dose, 30 to 60 grains.

Balmony (*Chelon Glabra*) is deobstruent and anthelmintic. Used in costive habits and verminose cases.

Balm (*Melessia Officinalis*) is sudorific. Used in febrile complaints. Dose, any quantity.

Balm of Gilead—Balsam of Fir (*Canada Balsam*) is diuretic and anthelmintic. Used in chronic catarrhal

affections, gleet, worms, rheumatism, &c. Dose 20 to 40 drops.

Balsam of Copaiava is stimulant, diuretic and laxative.

Used in diseases of the mucous membrane. Dose 40 to 60 drops.

Basswood (*Tilia*) is emollient. Used for poultices.

Barberry (*Berberis vulgaris*) refrigerant and anti-scorbutic. Used in Diarrhœas and scurveys. Dose, tea-spoonful.

Bayberry, Myrtle, (*Myrica Cerifera*) is astringent, stimulant and mucilaginous. Used in cases of debility. Dose a teaspoonful.

Bateman's Drops, Paregoric, is an anodyne and anti-spasmodic. Used to allay coughs, gripings, &c. Dose, for infants, 5 to 20 drops.

Beech Drops (*Orobanche Virginiana*) is a bitter astringent. Good in bowel complaints, ulcers and cancerous affections. Dose 1 to 2 teaspoonsfuls.

Benzain (*Styrax Benzoin*) is stimulant and expectorant. Used in pectoral affections. Dose a tea-spoonful.

Birch (*Bentula Lenta*) is an aromatic astringent. Dose 1 or 2 tea-spoonfuls.

Bitter-root--Indian hemp, (*Apocynum Cinnabinum*) is emetic and cathartic. Used in dropsies and morbid affections of the bowels. Dose 15 to 30 grains.

Bitter-sweet (*Solanum Dulcamara*) is a stimulant narcotic. Used in eruptive diseases of the seaby character. Dose 30 to 60 grains.

Blackberry-root (*Rubus Villosum*) is tonic and astringent. Good in Diarrhœa from relaxation of the bowels. Dose 20 to 30 grains.

- Black Pepper (*Piper Nigrum*) is a warm carminative stimulant. Used in intermittents.
- Black Snake-root (*Cinicifuga Ricemosa*) is a tonic stimulant. Used in chronic affections of the secretions, lungs, skin, kidneys, &c. Dose 40 to 60 grains.
- Blessed Thistle (*Centaura Benedicta*) is diaphoretic and emetic. Used to assist vomiting and keep up a perspiration. Dose, 20 to 60 grains.
- Black-root (*Septandra Virginica*) is cathartic and emetic. Used in constipation mostly with other alterants. Dose 20 to 30 grains.
- Blood-root (*Sanguinaria Canadensis*) is emetic and deobstruent. Used in coughs and morbid affections of the lungs, liver, &c. Dose 3 to 12 grains.
- Blue Vitriol (*Cupri Sulphas*) is tonic, astringent and emetic. Used in intermittents, spasmodic diseases, bleedings, &c. Dose 1 to 5 grains.
- Blueberry—Cohosh (*Caulophyllum Thalictroides*) is an aromatic tonic and anti-spasmodic. Used in spasmodic affections and as an *antidote* to animal poisons. Dose 1 to 2 tea-spoonfuls.
- Boneset (*Eupatorium Perfoliatum*) is tonic and dia-phorectic and emetic. Good in intermittents, colds, catarrhs, &c. Dose 15 to 20 grains.
- Borax (*Soda Boras*) is diuretic and emmenagogue. Used in menstrual and ophthalmous affections. Dose, 20 to 40 grains.
- Buchee leaves (*Diosmo Creneta*) is stimulant with a peculiar tendency to the bladder. Used in gravelly cases. Dose 20 to 30 grains.

Burdock (*Arretium Sappa*) is aperient and sudorific.

Used in scorbutic, scrofulous and nephritic affections, poultices &c. Dose 30 to 60 grains.

Burgundy Pitch (*Pix Abietis*) is rubifacient and applied externally in affections of the back and breast.

Butternut (*Ingleans Cinerea*) is cathartic. Used to evacuate the bowels. Dose 15 to 30 grains.

Calomel, (*Hydrorgyri Chloridium mite,*) is purgative, anthelmintic and deobstruent. Used in bilious and glanular complaints. Dose 10 to 25 grains.

Camphor, (*Camphora,*) is anodyne disphoretic and anthelmentic. Used in cerebral and nervous diseases; also, externally in bruises, &c. Dose 5 to 10 grains.

Camella alba is an aromatic stimulant and tonic.—
Used in debility. Dose 5 to 15 grains.

Carbonate of Amonia, (*Ammonia Carbonas*) is stimulant, anti-spasmodic and diaphoretic. Used in the latter part of febrile cases and poisons; applied externally in pains, &c. Dose 5 to 10 grains.

Cardamom, (*Cardamorum*) is an aromatic stimulant.
Used in flatulency, and as an adjuvant. Dose 5 to 20 grains.

Caraway, (*Carum Carui*) is a stomachic and carminative. Used in flatulent, colics, &c. Dose 20 to 60 grains.

Carearilla (*Croton Eleutheria*) is aromatic and tonic.
Used in remittent and intermittent fevers, dyspepsia, &c. Dose 20 to 40 grains.

Castor (*Castorium*) is stimulant and anti-spasmodic.—
Used in nervous affections. Dose 10 to 20 grains.

Castile Soap (*Sopo Mollis*) is laxative and antacid.—

Used in debility of the stomach, gravelly cases of the urine, acid disathesis and poison from acids.—

Dose 3 to 30 grains.

Castor Oil (*Oleum Ricini*) is cathartic. Used in bowel complaints, costiveness, &c. Dose 1 to 4 fluid drachms.

Catechu (*Acacia Catechu*) is tonic and astringent.—

Used in intermittents, debility, &c. Dose 10 to 30 grains.

Catnep (*Nepeta Cataria*) is tonic and excitant. Used in amenarhoea and other menstrual diseases. Dose 60 to 80 grains.

Cayenne Pepper (*Capsicum Annuum*) is a powerful stimulant. Used in enfeebled and languid states of the system. Dose 5 to 10 grains.

Chalk, prepared, (*Calcis Carbonas Præparatus*) is anti-acid. Used in bowel complaints, and externally on excoriated surfaces. Dose 10 to 40 grains.

Centaury, American, (*Sabbatia Angularis*) is a tonic bitter. Used in intermittent fevers. Dose 30 to 60 grains.

Chamomile (*Anthemis nobilis*) is tonic and slightly emetic. Used in enfeebled digestion. Dose 30 to 60 grains.

Charcoal (*Carbo Ligni*) is antiseptic and anti-scorbutic. Used in nausea and confined state of the bowels, putrid sores, &c. Dose 10 to 60 grains.

Chloride of Lime (*Calcis chloridium*) is a disinfecting

agent. Used in ill-conditioned ulcers, cutaneous eruptions, &c. Mostly applied externally.

Chloride of Soda (*Sodæ Chloridum*) is a powerful disinfectant. Used mostly externally in putrid ulcers, sores, burns, scald head, &c.

Chocolate (*Cocoa*) is nutritive. Used as a drink in the convalescent state.

Cicuta, Hemlock, (*Conium maculatum*) is narcotic.— Used in enlargements of the liver and other abdominal viscera, in chronic nervous affections. Dose 1 to 4 grains, gradually increased.

Cinnamon (*Launus Cinnamomum*) is aromatic. Used in bowel complaints, nausea, vomiting, &c. Dose 10 to 20 grains.

Citric Acid (*Acidum citricum*) is tonic. Used for making the effervescent draught and lemonade.

Cleavers (*Galium Aparine*) is aperient and diuretic.— Used in diseases of the bladder, spleen, kidneys, &c. Dose 30 to 60 grains.

Cinquefoil (*Potentilla Reptans*) is astringent. Used in diarrhoeas. Dose 30 to 60 grains.

Citrons—Lemons (*Citrus Medica*) is a stomachic and refrigerant. Used in irritability of the stomach. Dose *ad libatum*.

Cloves (*Eugenia Caryophyllata*) is a stimulant aromatic. Used to correct flatulency, nausea and vomiting. Dose 5 to 10 grains.

Cobweb—Spider's web, (*Tela Araneac*) is an anodyne. Used in spasmodic and nervous diseases, intermittents, hysterics, &c. Dose 5 to 10 grains.

Coccus Indicus is a narcotic. Used externally as an ointment to cure tinea capitis; also used to stupefy fishes in order that they may be caught.

Cochineal (*Coccus Cacti*) is slightly anodyne. Used mostly to color tinctures and ointments.

Coffee (*Coffee Arabica*) is somewhat narcotic, stimulant and excitant, and when much used injures the tone of the stomach, giving rise to troublesome dyspeptic affections and nervous derangement or depression equivalent to the previous excitement.

Cohosh (*Caulophyllum Thalictroides*) is aromatic and anti-spasmodic. Used to relax the animal fibres.—Dose a tea-spoonful.

Colic-root (*Halanias Dioica*) is tonic. Used in colic and painful complaints in the bowels. Dose 10 to 30 grains.

Colocynth (*Cucumis Colocynthis*) is a hydragogue cathartic. Used in disorders of the brain. Dose 5 to 10 grains.

Colombo (*Coccus Palmatus*) is a mild tonic. Good in enfeebled state of the bowels, dyspepsia, &c.—Dose 10 to 30 grains.

Coltsfoot (*Tussilago Farfard*) is demulcent and expectorant. Used in coughs. Dose 30 to 60 grains.

Comfrey (*Symphytum Officirale*) is a mucilage and demulcent. Used in catarrhs, coughs, &c. Dose 2 to 60 grains.

Copperas (*Ferri Sulphus*) is tonic and astringent.—Good in amerorrhœa, diabetes and scrofulous habits. Dose 1 to 5 grains.

Coriander (*Coriandrum Sativum*) is an aromatic.—

Good in griping pains in the bowels. Dose 20 to 60 grains.

Corrosive Sublimate (*Hydrgyri Cloridum Corrosivum*) is deobstruent and alterant. Internally used it is good in syphilis, glandular diseases, &c. Used externally it is good in ill-conditioned sores, ulcers, scaly eruptions, &c. Dose $\frac{1}{8}$ to $\frac{1}{4}$ of a grain.

Cowhage, down, (*Dolichos Pruriens*) is a powerful verifuge. Used in verminose cases. Dose a tea-spoonful for a child 2 or 3 times a day.

Cranesbill (*Geranium maculatum*) is a powerful astringent. Used in bowel complaints, cholera infantum and bleedings. Dose 20 to 30 grains.

Cream of Tartar (*Potassæ Supertutras*) is refrigerant aperient and diuretic. Used in febrile, inflammatory and dropsical complaints. Dose 1 to 2 drachms.

Croton Oil (*Croton Teglium*) is a hydrogyne cathartic. Used in diseases of the brain, dropsies, &c. Dose 1 to 3 drops. Applied externally it produces pustular eruptions.

Crowfoot (*Ranunculus bulbosus*) is vesicating and may be employed as an episostic.

Crode Antimony (*Antimonii Sulpheretum*) is not so much used for humans as horses.

Cubebs (*Piper Cubeba*) are stimulant and slightly diuretic. Used in gonorrhœa, gleet, luchorrhœa and diseases of the mucous membrane. Dose 1 to 3 drachms.

Curcuma-Turmeric is a stimulant dromatic. Used in

jaundice and other vineral diseases. Dose 20 to 30 grains.

Dandelion (*Leontodon Taraxcum*) is tonic, diuretic and aperient. Used in hepatia and digestive diseases, and also in deficient biliary secretions. Dose of the extract 20 to 60 grains.

Deadly Nightshade (*Atropa Belladonna*) is narcotic and diuretic. Used in scrofulous, nervous and convulsive diseases, and also in scarlatina, amaurosis and hooping cough. Dose $\frac{1}{2}$ to 2 grains.

Digitalis—Foxglove (*Digitalis purpurea*) is narcotic, sedative and diuretic. Used in febrile and inflammatory affections, pulmonary and hepatic diseases. Dose 1 to 2 grains.

Dill seeds (*Anethi Semina*) is aromatic. Used in flatulency. Dose 15 to 60 grains.

Dittary, American, (*Cunila Marianæ*) is a stimulant aromatic. Used to excite perspiration and suppression of the menses. Dose 1 to 2 drachms.

Dock, sour, (*Rumex Crispus*) is alterant, tonic and astringent. Used as a *dentifrie*, both externally and internally, and will cure the itch in the form of an ointment.

Dogs-bane (*Apocynum Androæsnufollum*) is emetic. Used to evacuate the stomach in morbid affections. Dose 25 to 40 grains.

Dogwood (*Cornus Florida*) is tonic and astringent.—Used in intermittents, debility, &c. Dose 30 to 60 grains.

Dogwood, swamp, (*cornus sericed*) is tonic and as-

tringent. Good in remittents, intermittents and loss of action from morbid diseases. Dose 30 to 60 grains.

Eleterium (*Momordica Eleterium*) is a powerful hydragogue cathartic. Used in dropsical complaints. Dose 1 to 2 grains.

Elder, berries, (*Sambucus canadensis*) is aperient and diaphoretic. Used as an alterative in rheumatic, gouty and syphilitic affections. Dose 2 to 4 drachms.

Elecampane (*Inula Helenium*) is tonic, stimulant and expectorant. Used in chronic affections of the lungs, chest and abdominal viscera. Dose 20 to 60 grains.

Elixir of Vitrol (*Acidum Sulphuricum aromaticum*) is tonic and astringent. Used in debility, night sweats and loss of appetite. Dose 10 to 30 drops.

Emetic Tartar (*Antimonii et Potassa Tartras*) is emetic, cathartic, alterative and expectorant. Used in fermentive, inflammatory complaints; externally employed as a counter-irritant. Dose 1 to 6 grains.

Epsom Salt (*Magnesia Sulphas*) is cathartic. Used mostly in fevers and inflammatory affections. Dose $\frac{1}{2}$ to 1 ounce.

Ergot, Spurred Rye (*Secale Cornutum*) is an abortive or *portus accelerator*. Used to increase the action of the womb and restrain hemorrhage after delivery. Dose $\frac{1}{2}$ to 1 drachm.

Ether (*Ætherea*) is anti-spasmodic and diffusible stimulant. Used in some cases of low fever attended with *subsultus tendinum*, hysterick and nervous headaches. Dose $\frac{1}{2}$ to 2 drachms.

Evan-root (*Geum Virginianum*) is deobstruent and tonic. Used in debility and morbid complaints.— Dose 1 to 2 drachms.

Eyebright (*Euphrasia Officinalis*) is alterant. Used in disorders of the eyes to improve vision. Dose 1 to 2 drachms.

Fennel Seed (*Anethum Foeniculum*) is aromatic and corrigent. Used to expel wind and strengthen the bowels. Dose 20 to 40 grains.

Feverfew (*Matricaria Parthenium*) is sudorific and slightly emetic. Used in abstracted perspiration. Dose 1 to 2 drachms.

Fever-root (*Triostium Perfoliatum*) is cathartic and emetic. Used in febrile complaints. Dose 20 to 30 grains.

Flaxseed (*Linum Usitatissimum*) is demulcent and emollient. Used in inflammatory affections of the mucous membrane of the lungs, intestines and urinary passages. Good for poultices.

Flowers of Benzoin (*acidum Benzoicum*) is stimulant and expectorant. Used in preparations and cosmetic washes.

Fowler's Solution (*Liquor Potassæ arsenitis*) is tonic. Used in intermittents, periodical headaches, and inveterate cutaneous affections. Dose 10 drops, 3 or 4 times a day.

Galbanum (*Bubon Galbanum*) is stimulant, expectorant and anti-spasmodic. Used in chronic affections of the bronchial mucous membranes, amenorrhœa, and chronic rheumatism. Dose 10 to 20 grains.

Gambage (*Gambojea*) is a drastic cathartic. Used in obstinate constipation, torpid bowels, dropsy, &c. Dose 3 to 6 grains.

Garlick (*Allium Sativum*) is a tonic and condiment. Used in chronic catarrh, humoral asthma and pectoral affections. Frequently applied to the skin as a rubefacient. Dose half to one drachm.

Gentian (*Gentiana Lutea*) is tonic. Used in Dyspepsia, gout, intermittent fevers, &c. Dose 10 to 40 grains.

Ginger (*Zinziber Officinale*) is a stimulant and carminative. Used in a feeble state of the alimentary canal, flatulent colic, &c. Dose 10 to 25 grains.

Ginseng (*Panax Quinquefolium*) is demulcent and tonic. Used in debility and of late in pulmonary affections. Dose 30 to 60 grains.

Glass of antimony (*Antimonii Vitrum*) is emetic and disphoretic. Used to evacuate the stomach and allay febrile excitement. Dose 1 to 3 tea-spoonfuls.

Glauber's salt (*Sodæ Sulphas*) is a cooling purge.— Used in febrile and inflammatory complaints. Dose, $\frac{1}{2}$ to 1 ounce.

Golden Sede (*Hydrastis Canadensis*) is a bitter tonic and slightly laxative. Used as stomachic bitters to aid the powers of digestion. Dose 1 tea-spoonful.

Golden-rod (*Solidago Odora*) is stimulant and carminative. Used to allay nausea and flatulency. Dose 30 to 60 grains.

Gold Thread (*Coptis Trifolia*) is a tonic bitter. Used mostly in canker of the mouth.

Heal-all (*Prunella Vulgaris*) is tonic and astringent.—

Used in haemorrhages, diarrhoea and sore throat.
Dose 30 to 40 grains.

Hellebore, black, (*Helleborus Niger*) is adrostic, hydragogue cathartic and also an emmenagogue.—
Used in amenorrhœa. Dose 15 to 20 grains.

Hemlock Pitch (*Pix Canadensis*) is rubefacient. Used as a plaster on the breast in pains and consumptive cases.

Henbane (*Hyoscyamus Niger*) is a narcotic. Used in irregular nervous action, neuralgia and spasmodic affections. Dose of the extract 1 to 2 grains.

Hollyhock (*Althæ Rosea*) is demulcent. Frequently used in deranged menstruation and inflamed mucous membranes. Dose 1 to 2 drs.

Honey (mel) is an aliment and condiment, mostly used as the vehicle of more active substances.

Hops (*humulus supulus*) are tonic and antiseptic, used in nervous tremors, painful affections of the bladder and kidneys, intermittents, &c.; dose 2 or 3 fluid ounces. Also applied externally.

Hoarhound (*morrubium vulgare*) is tonic, and in large doses, laxative. Used in catarrhs, chronic hepatitis, jaundice, and various cachectic affections, &c.; dose 30 to 60 grs.

Horsechesnut (*æsculus hippocastanum*) is tonic and astringent. Used in intermittent fevers. Dose 1 to 2 dr.

Horsemint (*monarda punctata*) is stimulant and carminative. Used in sick stomachs and flatulent colics; dose 1 to 2 drs.

Horse-radish (*cochlearia armoracia*) is stimulant and, externally applied, rubefacient. Used in enfeebled condition of the digestive organs, &c. Dose $\frac{1}{2}$ to 1 drachm.

Hyssop (*hyssopus officinalis*) is a stimulant aromatic, used in chronic catarrhs, and in old debilitated habits. Dose 1 to 2 drs.

Iceland Moss (*Lichen Islandicus*) is demulcent and tonic. Used in copious and debilitating expectoration in pulmonary consumption. Dose 30 to 60 grains.

Indian Hemp (*apocynum cannabinum*) is an active emetic and cathartic, and sometimes diuretic. Used in dropsies and obstinate constipation. Dose of the extract 3 or 4 grs.

Indian Turnip—Wake Robin—(*arum triphyllum*) is a stimulant tonic. Used in chronic catarrhs and cachectic state of the system. Dose 10 to 15 grs.

Indigo (*Indigofera*) is alterant. Used in epileptic fits. Dose 1 dr., gradually increased to $2\frac{1}{4}$ ozs. a day.

Iodine (*iodinum*) is used internally and externally. Good in bronchocele, scrofula, syphilis, diseased glandular affections, and externally in erysipelas, and other cutaneous eruptions. Dose of the tincture, 10 to 40 drops.

Ipecac (*Ipecacuanha*) is emetic, diaphoretic and expectorant. Used in bowel complaints, coughs, catarrhs, and wherever you wish a mild emetic. Dose 20 to 30 grs.

- Iron Filings (*ferri filum*) is tonic and anthelmintic.
Used in verminose case. Dose 5 to 20 grs.
- Jalap (*convolvulus jalapa*) is an active cathartic. Used in constipation, dropsy, &c. Dose 10 to 20 grs.
- Jamestown weed (*datura stramonium*) is a powerful narcotic. Used in mania, epilepsy, neuralgia, &c. Externally it is good in hemorrhoidal affections. Dose of the seeds 1 to 2 grs.
- Jerusalem Oak—Wormseed—(*chenopodium anthelminticum*) is anthelmintic. Dose $\frac{1}{2}$ to 1 dr.
- Juniper (*juniperus communis*) is stimulant and diuretic. Used as an adjuvant to diuretics. Dose 1 to 2 drs.
- Kino is powerfully astringent, and is much used in the suppression of morbid discharges, diarrhoea and passive discharges. Dose 10 to 20 grs.
- Dactucarium (*lactuca sativa*) possesses soporific properties. Used in pulmonary consumption and irritating coughs. Dose 1 to 3 grs.
- Lard (*adeps*) is emollient. Used mostly as an ingredient of ointments and cerates.
- Laurel (*kalmia latifolia*) is narcotic. Used externally in tinea capitis, itch, herpes, and other cutaneous affections.
- Lavender (*lavandula spica*) is a stimulant and tonic. Used in certain conditions of nervous debility. The oil is most frequently employed in doses of from 10 to 15 drops.
- Leech (*hirudo medicinalis*) is in many instances the

most effectual means for the local abstraction of blood.

Lemons [*citrus medica*] are refrigerant; and are refreshing and a very agreeable beverage in febrile and inflammatory affections.

Life-everlasting [*gnaphalium margaritaceum*] is anodyne, and used in diseases of the chest and bowels. Dose 30 to 60 grains.

Lime [calx] is antacid and used mostly in dyspepsia, diabetes and gravel attended with superabundunt secretion of uric acid. Externally employed in burns and scalds, foul and gangrenous ulcers. Dose of lime-water 2 to 4 ozs.

Liquorice [*extractum glycyrrhiae*] is demulcent and used in coughs. Dose 30 to 60 grs.

Litharge [*plumbi oxidum lemiditreum*] is used in plasters for abating inflammation.

Liverwort [*hepatica Americana*] is demulcent, tonic and astringent. Used in liver affections and chronic coughs. Dose ad libitum.

Lobelia—Indian Tobacco—[*lobelia inflata*] is relaxant, emetic, diaphuretic and expectorant. Used in asthma, croup, coughs, febrile and inflammatory complaints. Dose of the powder as an emetic 5 to 20 grains.

Logwood [*hœmatoxylon Campeachianum*] is astrin- gent, and is good in the latter stages of chronic bowel complaint and cholera infantum. Dose of the decoction $\frac{1}{2}$ to 1 oz.

Lovage, (*Ligusticum Levisticum*) is a stimulant aromatic, and used in colds.

Lunar Caustic (*Argenti Nîtras*) is eschrotic, tonic and anti-spasmodic. Used in epilepsy and other spasmodic diseases; externally in sores, ulcers and cutaneous affections. Dose $\frac{1}{3}$ to 1 grain.

Madder (*Rubia Tinctorum*) is emmenagogue and diuretic, and is used in amenorrhœa, jaundice and visceral obstructions. Dose 30 to 40 grains.

Magnesia is antacid and laxative. Used in stone of the bladder, sour stomach, &c. Dose 10 to 30 grs.

Maidenhair (*Adiantum Pedatum*) is aromatic and used in catarrhs and other pectoral affections. Dose 30 to 60 grains.

Male Fern (*Aspidium Felix Mas*) is tonic, astringent and vermifuge. Mostly used in worm cases, especially tape worms.

Mallow (*Malva Sylvestris*) is emollient and demulcent. Used in catarrhal, dysenteric and kidney complaints. Dose 30 to 60 grains.

Mandrake (*Podophyllum Peltatum*) is cathartic, and is used in costiveness like jalap. Dose 20 to 25 grs.

Manna (*Froximus Ormus*) is laxative. Mostly used with other ingredients. Dose 1 to 2 oz.

Marsh Rosemary (*Statice Caroliniana*) is astringent and is used in canker and sore throat. Dose 20 to 30 grains.

Masterwort (*Heracleum Lanatum*) is stimulant and is used in flatulence and gastric disorders. Dose 1 to 2 drachms.

May-weed (*Anthemis Cotula*) is somewhat anti-spasmodic, and used in hysterical affections.

Meadow Saffron (*Colchicum Autumnale*) is a sedative and allays pains. Used in rheumatism and painful diseases. Dose to 4 to 8 grains.

Mercury (*Hydrogyrum*) is alterative and cathartic.—Used in biliary, glandular and hepatic complaints. Apt to excite *ptyalism*. Frequently employed externally. Dose 5 to 15 grains.

Mezereon (*Daphne Mezereum*) is epispastic and stimulant. Used as an alterative in scrofulous and obstinate diseases of the skin. Dose 10 to 15 grains.

Mistletoe (*Viscum Album*) is anti-spasmodic and has been used in epilepsy, palsy and other nervous diseases. Dose 1 to 8 drachms.

Monkshood—Wolfsbane (*Aconitum*) is a sedative, and operates upon the nervous system. Used in gout, rheumatism, cutaneous diseases, &c. Dose 1 to 4 grains.

Morphia is the narcotic principle of opium, and is applicable to relieve pain, quiet restlessness, promote sleep and allay nervous irritability. Dose $\frac{1}{6}$ to $\frac{1}{4}$ of a grain.

Moxa is small masses of combustible matter, burnt slowly in contact with the skin to produce aneschor.

Mugwort (*Artemisia vulgaris*) is a tonic, and has been much used in epilepsy. Dose 30 to 60 grains.

Mullein (*Verbascum Thapsus*) is demulcent and emollient, and used mostly externally as a poultice.

Muriatic Acid (*Acidum Muriaticum*) is refrigerant and

antiseptic. Used in gravelly cases where the sediment is whitish.

Musk (*Moschus Moschiferus*) is stimulant and anti-spasmodic. Used in spasmodic diseases. Dose 10 to 12 grains.

Mustard (*Sinapis*) is stimulant. Used in dyspepsia, but mostly applied externally as a poultice.

Myrrh (*Myrrha*) is a stimulant tonic, with some tendency to the lungs and uterus. Used in chronic catarrh and amenorrhœa. Dose 10 to 30 grains.

Mertle wax (*Myrica cerifera*) is mucilaginous. Used in dysentery in doses of a table spoonful.

Naptha is anti-spasmodic and sedative. Used in affections of the breast. Dose $\frac{1}{2}$ to a table spoonful.

Narcotin is narcotic and sedative. Dose 1-16 to $\frac{1}{8}$ gr.

Neats-foot Oil (*Oleum Bubulum*) is emollient. Mostly used in plasters.

Nettle (*Urtica Dioica*) is diuretic and astringent, and used in nephritic complaints, hemorrhages, &c.—Dose 30 to 60 grains.

Nitre (*Potassæ Nitræ*) refrigerant and anti-phlogistic. Much used in inflammatory complaints. Dose 5 to 15 grains.

Nitric Acid (*Acidum Nitricum*) is tonic and antiseptic. Used in febrile, syphilitic and calculous complaints. Dose 10 to 30 drops.

Nut-galls (*Galla*) is astringent. Much used in lotions, gargles and injections in bowel complaints and hemorrhages. Dose 10 to 20 grains.

Nutmeg (*Myristica Moschata*) is an aromatic, and used in languid appetite. Dose 5 to 20 grains.

Nux Vomica (*Strychnos nux vomica*) is directed to the nerves of motion. Used in palsies, local and general. Dose 5 to 8 grains.

Oak bark (*Quercus*) is astringent and somewhat tonic. Used in passive hemorrhages, diarrhoea, &c. Frequently employed as gargles and injections. Dose 30 to 60 grains.

Oat-meal (*Avena Sativa*) is a nutritious aliment.

Onion (*Allium Cepa*) is a condiment and esculent.— Frequently used in calculous disorders.

Osium (*Papaver somniferum*) is a stimulant narcotic. Used in febrile, inflammatory and painful disorders, hemorrhages and morbid discharges, &c. Dose $\frac{1}{4}$ to 1 grain.

Opodeldoc (*Linimentum saponis camphoratum*) is an anodyne, and used in sprains, bruises and rheumatic pains.

Orange Peel (*Duranti Cortex*) is tonic and stomachic. Used in affections of the stomach. Dose 30 to 40 grains.

Organum (*Origanum vulgare*) is tonic and excitant.— Used in amenorrhœa. The oil is mostly employed.

Ox Gall (*Fel bovinum*) is tonic and laxative. Used in deficient biliary secretion. Dose 5 to 10 grains.

Paregoric Elixir (*Tinctura opii camphorata*) is anodyne, and much used to allay coughs, relieve pain^s and procure sleep. Dose for an infant 5 to 20 drops.

Parsley Root (*Apium Petroselinum*) is aperient and di-

uretic, and used in affections of the kidneys and dropsical diseases. Dose 1 to 2 drachms.

Peach Leaves (*Amygdalus Persica*) are laxative and sedative, and used in diseases of the lungs, bladder and nervous diseases. The kernels, flowers and fruit are all used for similar purposes.

Pearlash—Potash (*Potassæ carbonas Impurus*) is antacid and caustic, and is used in sour stomach, and externally to fungus surfaces. Dose 10 to 30 grs.

Pennyroyal (*Hedoma Pulegioides*) is a stimulant aromatic and sudorific. Used to excite the *menstrue* flux and keep up an action on the skin. Dose 1 to 2 drachms.

Peppermint (*Mentha Piperita*) is an aromatic stimulant. Used to relieve spasmodic pains, expel flatus and allay sick stomach. Dose 1 to 2 drachms.

Peruvian Bark (*Cinchona*) is an anti-periodic, tonic and febrifuge. Used in periodicity or intermittent types of disease, and as a tonic in different states of diseases. Dose 1 to 2 drachms.

Phosphorus is stimulant, and used in extreme prostration of the vital powers. Dose 1-20 to 1-10 of a grain.

Pink root (*Spigela Marilandica*) is an anthelmintic, and used in cases of worms. Dose for a child 10 to 30 grains.

Piperin is a warm stimulant, and much used as a febrifuge in intermittents. Dose 2 to 10 grains.

Piprissewa—Wintergreen (*Chimaphila Umbellata*) is diuretic and tonic. Used in complaints of the uri-

nary passages and cases of debility. Dose 20 to 60 grains.

Plantain (*Plantago major*) is refrigerant and deobstruent. Used in visceral obstructions, and often applied externally to ulcers. Dose 1 to 2 drachms.

Plaster, adhesive, (*Emplastrum Resinæ*) is spread on muslin, and much employed for retaining the sides of wounds in contact and dressing ulcers.

Pleurisy root—Butterfly weed (*Asclepias zuberosa*) is diaphoretic and expectorant. Much used in pleurisy, consumption. Dose 20 to 60 grains.

Poison oak (*Rhus Zoxicodendron*) is stimulant and narcotic, and used in palsies and obstinate cutaneous diseases. Dose 15 to 20 grains.

Poke Root (*Phytolacca Decandra*) is emetic and narcotic. Used in rheumatish and some forms of cutaneous diseases, and sometimes applied externally in cancers. Dose 10 to 20 grains.

Pomegranate (*Punica Granatum*) is astringent and vermifuge, and used in diarrhoea, followed by colligative sweats and for the expulsion of tape worms. Dose 20 to 30 grains.

Poplar (*Populus*) is tonic, and often used in intermitents and cases of debility. Dose 1 to 2 drachms.

Prickly Ash (*Xanthoxylum foaxineum*) is stimulant.—Used in chronic rheumatism. Dose 20 to 30 grains.

Dwarf (*Ligustrum vulgare*) is astringent. Used in sore mouth and throat.

Prussian Blue (*Ferri Ferrocyanas*) is tonic and altera-

ative. Used in intermittents and neuralgia of the face. Dose 5 to 10 grains.

Prussic acid (*Ucidum Hydrocyanicum*) is directly sedative. Used in pulmonary consumption and chronic coughs. Dose 2 to 10 drops.

Pumpkin seed is diuretic, and used in suppression of urine. Dose *ad libitum*.

Quassia is a tonic bitter, and used in debility of the stomach and malignant fevers. Dose $\frac{1}{2}$ to 1 dr.

Quina (*Quinæ Sulphas*) is anti-periodic and tonic, and mostly used in agues and fevers, though applicable to most periodical diseases. Dose 6 to 12 grains.

Raisins (*Uva Passa*) are laxative, and mostly used to flavor demulcent beverages.

Red Saunders (*Santalum*) is employed for the purpose of imparting color to alcoholic tinctures.

Red Precipitate (*Hydrorygyri oxidum Rubrum*) is used externally as a stimulant and escharotic in fungous ulcers and itch.

Red Clover. The extract is somewhat escharotic and used in furgess excesses.

Resin (*Resina*) is important as an ingredient of ointments and plasters.

Rhatany root (*Krameria Triandra*) is tonic and astringent. Used in passive hemorrhages and leucorrhœa. Dose 20 to 30 grains.

Rhubarb (*Rheum*) is cathartic, with an astringent power. Used in enfeebled and relaxed bowels. Dose 20 to 30 grains.

Rice (*Oryza Lativa*) is a nutritive food and drink, and admirably adapted to cases of weak bowels.

Rochelle Salt (*Sodæ et Potassæ Tartras*) is a cooling purgative, well suited to delicate and irritable stomachs. Dose 1 to 2 oz.

Root of Avens (*Geum Urbanum*) is tonic and astringent, and is used in passive hemorrhages, whites, &c. Dose 30 to 60 grains.

Rosemary (*Rosmarinus Officinalis*) is stimulant and emmenagogue, and enters into the composition of several syrups and tinctures.

Roses, red, (*Rosa Gallica*) are astringent and tonic. The infusion is an elegant vehicle for tonic and astringent medicines.

Rue Leaves (*Rutæ Folia*) are stimulant and anti-spasmodic. Used in hysterical, worms and colic cases. Dose 15 to 30 grains.

Rust of Iron (*Ferri Carbonas preparatus*) is a tonic and alterative. Used in debility, chronic dropsies, &c. Dose 10 to 20 grains.

Saffron (*Crocus Lativus*) is stimulant and anti-spasmodic. Used in eruptive diseases. Dose 10 to 30 grains.

Sage (*Salvia officinalis*) is tonic and aromatic, and is used as a condiment in debilitated conditions of the stomach and gargles of the throat.

Sago is a nutritive article of diet.

Sal Ammoniac (*Ammoniac Murias*) is an excitant and alterative in rheumatic fevers, catarrhs, &c.; and ex-

ternally applied in the form of lotions to tumours, contusions, &c. Dose 5 to 30 grains.

Salt (*Sodii Chloridum*) is a stimulant tonic and purgative. Mostly used in hemoptysis, worms, scarlet fever, croup, &c. Dose $\frac{1}{2}$ to 1 oz.

Sarsaparilla (*Smilix Sarsaparilla*) is alterative and used in scrofulous, cutaneous and suphilaid diseases. Dose $\frac{1}{2}$ to 1 drachm.

Sassafras (*Laurus Sassafras*) is stimulant and diaphoretic. Used in chronic rheumatism, scorbutic and cutaneous affections. Dose of the oil 3 to 12 drops.

Savine (*Juniperus Sabina*) is stimulant and emmenagogue. Used in amenorrhœa in doses from 5 to 15 grains.

Scammony (*Convolvulus Scammonia*) is an active cathartic. Used in torpid bowels. Dose 5 to 10 grs.

Scullcap (*Scutellaria Sateriflora*) has been used as a prophylactic in hydrophobia, and applied to old ulcers. Dose a table spoonful.

Seneka (*Polygala Senega*) is a stimulating expectorant and diuretic, and is used in chronic catarrhs and suppression of the menses. Dose 10 to 20 grs.

Senna (*Cassia Senna*) is cathartic and well calculated for fevers and febrile complaints. Dose $\frac{1}{2}$ to 1 dr.

Silk weed (*Asclepias Syriaca*) is anodyne, and used in asthmatic and catarrhal cases. Dose $\frac{1}{2}$ to 1 dr.

Skunk Cabbage (*Symplocarpus Fætida*) is anti-spasmodic and somewhat anodyne. Used in asthma, puerperal convulsions and hysteria. Dose 10 to 20 grains.

Slippery Elm bark (*Ulmus Fulva*) is an excellent demulcent. Used in urinary and bowel complaints. Good for emollient poultices.

Smart weed—Biting krot weed (*Polygonum Hydropiperoides*) is emmenagogue and used in suppression of the menses. Dose 4 to 8 grains.

Soda (*Sodæ Bickarbonas*) is antacid and used in acidity and calculous affections. Dose 10 to 60 grains.

Southernwood (*Artemesia Santonica*) is a verminifuge, and used in verminose cases. Dose 10 to 30 grs.

Spanish Flies (*Cantharis vesicatoria*) internally used is stimulant and good in leucorrhœa and incontinency of urine, gleet and seminal weakness. Externally employed they are episostic. Dose 1 to 3 grains.

Spearmint (*Mintha Viridis*) is an aromatic stimulant and used to relieve flatulent pains. Dose 1 to 2 drachms.

Spermaceti (*Cetaceum*) is emollient and mostly used in ointments and cerates.

Spice wood *Saurus Benzoon*) is aromatic, and used as a febrifuge in low forms of fever as a drink.

Spikenard (*Aralia Racemosa*) is an alterative and diaphoretic, and used in pulmonary and catarrhal affections. Dose 1 to 2 drachms.

Spirits, distilled, (*Spiritus*) is stimulant, and chiefly used to impart a pleasant odor and taste to mixtures and dissolve and correct the nauseating and griping effects of other medicines.

Sponge (*Spongia Officinalis*) in consequence of its

softness, porosity and property of imbibing liquids, it is very useful in surgical operations.

Squill (*Scilla Maratima*) is expectorant, diuretic and emetic. Used in catarrhs, pulmonary and dropsical complaints. Dose 2 to 12 graias.

Starch (*Amylum*) is nutritive and demulcent. Powdered and dusted upon the skin it is sometimes used to absorb irritating secretions and prevent excoriations.

Sugar (*Saccharum*) is nutritious and antiseptic. Used to impart flavor to mixtures and syrups.

Sugar of Lead (*Plumbi acetas*) is astringent and sedative. Used in restraining the discharge of blood and externally to superficial inflammations. Dose 1 to 3 grains.

Sulphur is laxative and diaphoretic, and used in hemorrhoidal and cutaneous affections. Externally employed in itch. Dose 1 to 3 drachms.

Sumach (*Rhus Glabruin*) is astringent and refrigerant. Mostly used for gargles in sore mouths and throat.

Summer Savory (*Satureja Hortensis*) is aromatic and used in debility.

Swamp Dogwood (*Cornus Sericea*) is a bitter tonic, and used to cure and prevent the ague and fever.—Dose 1 to 2 drachms.

Sweet Oil (*Oleum Olivæ*) is nutritious and laxative, and used in worms and externally applied in burns and scalds. Dose 1 to 2 oz.

Sweet Flax (*Acorus Calamus*) is a stimulant tonic.—

Used in pain in the stomach and bowels. Dose 20 to 60 grains.

Sweet Gum (*Liquidambar Styraciflua*). The bark is astringent, and used in bowel complaints. The gum is soothing and emollient. Used in coughs and applied to sores. Dose of the bark 1 to 2 drachms; the gum 10 to 20 grains.

Sweet spirit of Nitre (*Spiritus Ætheris Nitrici*) is diaphoretic, diuretic and anti-spasmodic. Used in febrile affections. Dose $\frac{1}{2}$ to 1 teaspoonful.

Tamarinds (*Tamarindus*) are laxative and refrigerant, and are grateful drinks in febrile diseases. Dose $\frac{1}{8}$ to 1 ounce.

Tansey (*Tanacetum*) is an aromatic bitter, and used in worms and suppression of the menses. Dose $\frac{1}{2}$ to 1 drachm.

Tapiaca is nutritous, and is used for diet for the sick and convalescent.

Tar (*Pix Liquida*) is loosning and expectorant. Used in chronic coughs, and externally applied in scald head and foul ulcers. Dose $\frac{1}{2}$ to 1 drachm.

Tartaric Acid (*Acidum Tartaricum*) is refrigerant, and is an ingredient in soda and seidlitz powders.

Tartrate of Iron and Patassa is one of the most agreeable preparations of iron. Used as a tonic. Dose 10 to 30 grains.

Tea (*Thea*) is astringent and gently excitant, and is long continued in excessive quantity, it is capable of inducing unpleasant *nervous* and *dyspeptic* symptoms.

Tobacco (*Nicotiana Tobacum*) is a sedative narcotic; mostly used as injections in ruptures and bowel complaints. Externally to sores and ulcers. Ought not to be used as a beverage by lean and spare persons.

Touch-me-not (*Impatiens Balsamina*) is cathartic, and is used as an ointment in piles.

Turpentine (*Terebinthina*) is stimulant, orthilmintic and laxative. Used in colics, worms, rheumatism, &c. Applied externally in sprains and bruises. Dose $\frac{1}{3}$ to 1 ounce.

Unicorn is tonic and deobstruent, and used in debilities.

Uva Ursi (*arbutus Uva Usi*) is astringent, tonic and antilithic, and is used in diseases of kidneys and bladder. Dose 20 to 60 grains.

Valarian (*Valeriana officinalis*) is stimulant and somewhat anodyne. Used in nervous diseases. Dose 30 to 90 grains.

Verdigris (*Cupri acetas*) externally applied is detergent and escharotic, and employed in surgous and ulcerous cases.

Vinegar (*acetum*) is refrigerant and diuretic, and is used as drink in inflammatory fevers. Dose 1 to 4 drachms.

Virginia Snakeroot (*aristolochia serpentaria*) is stimulant, tonic and diaphoretic. Used in typhoid fevers and cutaneous affections. Dose 10 to 30 grains.

Vervain (*verbena hastata*) is tonic, and has been used in scrofulous cases. Externally applied to relieve local pains. Dose 1 to 2 drachms.

Watermelon (*Cacurbiti Citrullus*) is diuretic, and used in strangury and other affections of the urinary passages. Dose $\frac{1}{2}$ to 1 ounce.

White Vitrol (*Zinci Sulphas*) is tonic, astringent and emetic. Used in spasmodic diseases, poisons, &c. Externally in washes and collyriums. Dose 10 to 30 grains.

White Pond Lily (*Nymphæ Odorata*) is stimulant and deobstruent. Used in syrups and poultices to inflamed tumors. Dose 1 to 2 drachms.

White Oxide of Bismuth (*Bismuthum*) is tonic and anti-spasmodic. Used in palpitation of the heart and various painful affections of the stomach. Dose 5 to 15 grains.

Wild Ginger (*asdrum*) is tonic and diaphoretic, and used as an adjuvant to infusions and decoctions.—Dose 20 to 30 grains.

Willow (*Galix*) is tonic, and employed in intermittent fevers. Dose 5 to 10 grains.

Wine (*Vinum*) is stimulant, and used in low fevers, debility and in the stage of convalescence. Dose 1 to 2 wineglasses full.

Wild Cherry Bark (*Prunus Virginiana*) is tonic and anti-spasmodic. Used in consumption, scrofula and intermittents. Dose 1 to 2 drachms.

Witch Hazel (*Hamamelis Virginica*) is astringent, and used in bleedings, hemorrhoidal and ophthalmia affections. Dose 1 to 2 drachms.

Wood Sorrel (*Oxalis Acetosella*) is refrigerant and di-
scutient. Used in febrile affections. The extract

employed to cure schirrhous and cancerous diseases. Worm Moss is a vermifuge, and used in verminoise cases.

Wormwood (*artemesia absinthium*) is tonic and used in debilitated condition of the digestive organs, and employed externally by way of fomentations. Dose 1 to 2 drachms.

Yarrow (*achillea millifolium*) is tonic and astringent. Used in hemorrhages and mucous discharges. Dose 1 to 2 drachms.

Yeast (*Cervisiae Fermentum*) externally employed is very useful in foul and sloughing ulcers.

Yellow root (*Xanthorhiza apiiifolia*) is tonic and used in debility and sore mouth. Dose 20 to 40 grains.

Yellow Wax (*Cera Flava*) is mostly used in ointments, cerates and plasters.



